UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).			
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FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

				01 30011 30(11) 01 110		nont c	ompany not of	1040						
1. Name and Address of Reporting Person [*] Kong Garheng				2. Issuer Name and Ticker or Trading Symbol Venus Concept Inc. [VERO]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				r	L		- 1		X Director	X 1	0% Owner			
(Last) C/O VENUS C	(First) CONCEPT INC. ND BLVD., SUIT	(Middle)		3. Date of Earliest Trans 06/16/2020	saction (Month	I/Day/Year)		Officer (give ti below)		ther (specify elow)			
	ND BLVD., 301		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable					
(Street) TORONTO	A6	M2J 4Y8	3							ne) X Form filed by One Reporting Person Form filed by More than One Reporting P				
(City)	(State)	(Zip)												
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
Date			2. Transaction Date (Month/Day/Ye	Execution Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
				Code	v	Amount (A) or Price		Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)			
Common Stock 06/16/2		06/16/202	20	С		1,200,000	A	(1)	5,195,621	I	By Partnership ⁽²⁾			

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		Deri Sec Acq or D of (E	umber of vative urities uired (A) isposed)) (Instr. and 5)	6. Date Exerc Expiration Da (Month/Day/)	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Form: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Series A Preferred Stock	(1)	06/16/2020		с			120,000	06/16/2020	(3)	Common Stock	1,200,000	\$0	0	I	By Partnership ⁽²⁾

Explanation of Responses:

1. The shares of Series A Preferred Stock were originally purchased from the Issuer at a purchase price of \$2.50 per unit (consisting of one-tenth of one share of Series A Preferred Stock and 0.75 of a Warrant, with each whole Warrant exercisable for one share of Common Stock, at an exercise price of \$3.50 per share). Each share of Series A Preferred Stock converted into ten shares of Common Stock for no additional consideration.

2. Held by HealthQuest Partners II, L.P. ("HealthQuest"). HealthQuest Venture Management II, L.L.C. ("HQVM II"), the general partner of HealthQuest, and Garheng Kong, the managing member of HQVM II, may be deemed to have sole voting and dispositive power with respect to the shares held of record by HealthQuest. Mr. Kong and HQVM II disclaim beneficial ownership of all shares held by HealthQuest except to the extent of any pecuniary interests therein.

3. The Series A Preferred Stock had no expiration date.

Remarks:

/s/ Domenic Di Sisto, attorney-06/18/2020 in-fact

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.