## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Į	OMB APPROV	/AL
1	OMB Number:	3235-0287
	Estimated average bur	rden
	hours per response	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	3)												
1. Name and Address of Reporting Person * Conacher Lionel F.				2. Issuer Name and Ticker or Trading Symbol Better Choice Co Inc. [BTTR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director 10% Owner					
(Last) (First) (Middle) 12400 RACE TRACK ROAD			3. Date of Earliest Transaction (Month/Day/Year) 02/01/2022						Officer (give	e title below)	Othe	(specify below	v)	
(Street) TAMPA, FL 33626			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(Cit	y)	(State)	(Zip)			Table I - No	n-De	rivative Secu	rities Acqu	ired, Disposed	of, or Bene	ficially Owne	d	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea			3. Transac Code (Instr. 8)		(A) or Dispose		sed of (D) Owned Follow nd 5) Transaction(s		d (	Ownership Form:	Beneficial
		(Month/Day/Yea		Code	V		(A) or (D) Price	(Instr. 3 and 4)	ir. 3 and 4)		Direct (D) Ownership or Indirect (Instr. 4) (Instr. 4)			
Common	Stock		02/01/2022			A		43,669 A	\$ 2.29	53,669		I	)	
Reminder:	Report on a s	separate line for each	n class of securities l	beneficial	ly owned o	j i	Person this	ons who res s form are n	ot require	e collection of to respond MB control n	unless the		ed SEC	474 (9-02)
Reminder:	Report on a s	separate line for each	n class of securities l	beneficial	ly owned	j i	Person this	ons who res s form are n	ot require	d to respond	unless the		ed SEC	474 (9-02)
1. Title of	•	3. Transaction	Table II - 3A. Deemed Execution Date, if	- Derivat (e.g., pu 4. Transact Code	ive Securi ts, calls, w 5. Numb of Deriv Secur Acqui (A) or Dispo	tites Acquires arrants, opt 6. Date er Expira (Month	Person this lisplant of the li	ons who res s form are n ays a currer  posed of, or l convertible s cisable and bate	ot required the properties of	d to respond oMB control n  Owned  ad Amount of ag Securities	unless the umber.	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	To Ownersh Form of Derivati Security Direct (I or Indirect) (I)	ip of Indire Benefic (Instr. 4
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 3A. Deemed Execution Date, if	- Derivat (e.g., pu 4. Transact Code	ive Securi ts, calls, w 5. Numb of Deriv Secur Acqui (A) or	tites Acquires arrants, opt 6. Date Expira (Month tites red seed 3,	Person this lisplant of the li	ons who res s form are n ays a currer  posed of, or l convertible s cisable and bate	ot required the control of the contr	d to respond oMB control n  Owned  ad Amount of ag Securities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	Townersh Form of Derivati Security Direct (I or Indire	ip of Indire Benefic (Instr. 4
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#### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Conacher Lionel F. 12400 RACE TRACK ROAD TAMPA, FL 33626	X				

### **Signatures**

Becky Pickett, Attorney-in-Fact for Lionel F Conacher	02/03/2022
Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* 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).

- (1) Annual restricted stock grant under the Company's Amended and Restated 2019 Plan for board service with no vesting conditions.
- (2) Options exercisable according to the vesting terms in the related option agreement.

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

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