FORM 4

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

OMB APPE	ROVAL
OMB Number:	3235-0287
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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

I. Name and Address of Reporting Person * Labrucherie Gil M			2. Issuer Name and Ticker or Trading Symbol Rezolute, Inc. [RZLT]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner					
(Last) (First) (Middle) C/O REZOLUTE, INC., 201 REDWOOD SHORES PARKWAY, SUITE 315				3. Date of Earliest Transaction (Month/Day/Year) 06/23/2022					_	Officer (giv	e title below)	Oth	er (specify below	r)
(Street) REDWOOD CITY, CA 94065				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by One Reporting Person Form filed by More than One Reporting Person				
(Cit		(State)	(Zip)	Table I - Non-Derivative Securities Acq			es Acquired	uired, Disposed of, or Beneficially Owned						
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)	any	emed on Date, it /Day/Year	Code (Instr.	(A. Securities Acq A) or Disposed Instr. 3, 4 and 5	of (D) Ow Trai		Securities Being Reporte	d	Ownership Form: E Direct (D)	'. Nature of Indirect Beneficial Ownership Instr. 4)
Reminder	Report on a	separate line for each	class of securities l	peneficial	lly owned	lirectly	or indirectly	7.						
Reminder:	Report on a s	separate line for each	Table II -	Derivati	ive Securi	ies Acq	Persor in this display	ns who respor form are not r rs a currently osed of, or Ben	equired to valid OMB eficially Ow	respond control r	unless the		ned SEC 1-	474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transaction	Table II -	Derivati (e.g., put 4. Transaci Code	ive Securi ts, calls, w 5. Nu of De Secur Acqu	ies Acq arrants mber rivative ities ired (A) sposed	Persor in this display uired, Disp options, co 6. Date Ex Expiration (Month/Da	ns who resported are not reported are not reported as a currently cosed of, or Benconvertible securer cisable and Date	equired to valid OMB eficially Ow	control rened d Amount	unless the number.		of 10. Ownershi Form of Derivative Security: Direct (D) or Indirec (s) (I)	11. Natu p of Indire Benefici e Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 3A. Deemed Execution Date, if any	Derivati (e.g., put 4. Transaci Code	ive Securits, calls, was 5. Nution of De Security or Di of (Du (Instr	ies Acq arrants mber rivative ities ired (A) sposed	Persor in this display uired, Disp options, co 6. Date Ex Expiration (Month/Da	ns who resported form are not represented for the second forms of	equired to valid OMB eficially Own ities) 7. Title and of Underly Securities	control rened d Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	Of 10. Ownershi Form of Derivative Security: Direct (D or Indirec	11. Natu p of Indire Benefici e Ownersl (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Labrucherie Gil M C/O REZOLUTE, INC. 201 REDWOOD SHORES PARKWAY, SUITE 315 REDWOOD CITY, CA 94065	X					

Signatures

/s/ Gil Labrucherie		06/27/2022
Signature of Reporting Person	1	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).

The Option will become vested and exercisable as follows: one thirty-sixth (1/36) of such Option shall vest on the first day of the month following the Grant Date and each month (1) thereafter on the first day of each month until the Option is 100% vested. The unvested portion of the Option will not be exercisable on or after the Director's termination of Continuous Service.

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.