FORM 4

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

OMB APPE	ROVAL
OMB Number:	3235-0287
Estimated average	burden
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

1. Name and Address of Reporting Person* Pruden Gary J				2. Issuer Name and Ticker or Trading Symbol Motus GI Holdings, Inc. [MOTS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner					
	TUS GI H	(First) OLDINGS, INC LEVARD, 3RD	.,, 1301 EAST	3. Date o 02/10/2			nsacti	on (Month/I	Day/Year)	_	Officer (give	e title below)	Oth	er (specify below	r)
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
FT. LAUDERDALE,, FL 33301 (City) (State) (Zip)			Table I - Non-Derivative Securities Acou					s Acquire	ired, Disposed of, or Beneficially Owned						
(Instr. 3) Da		2. Transaction Date (Month/Day/Year)			l 3 Date, if C	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)		Amount of S wned Follow ransaction(s)	Securities Beneficially ing Reported		5. 7 Ownership o Form: E	7. Nature of Indirect Beneficial	
				(Month	/Day	/Year)	Cod	e V A	mount (A) or (D)	(In	or (I)		or Indirect (Ownership Instr. 4)	
Reminder:								in this f	s who respone orm are not re	equired t	to respond	unless the		eu sec i-	474 (9-02)
Reminder:			Toble II	Donivati	C			in this f	orm are not re s a currently v	equired t valid OM	to respond B control n	unless the		eu see i-	4/4 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	Table II - 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code	tion	5. Numb of Deriv Securities Acquired or Dispo of (D)	er ative es d (A)	in this f displays uired, Dispo options, con 6. Date Exe Expiration I (Month/Day	orm are not rest a currently vessed of, or Bene envertible securities and Date	equired to a contract of the c	to respond B control n wned nd Amount lying s	unless the umber. 8. Price of	9. Number of Derivative Securities Beneficially Owned Following	f 10. Ownershi Form of Derivative Security: Direct (D	11. Natur p of Indired Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	tion)	5. Numb of Deriv Securities Acquired or Dispo	er ative es d (A)	in this f displays uired, Dispo options, con 6. Date Exe Expiration I (Month/Day	sed of, or Bene envertible securiorisable and Date //Year)	ficially O ities) 7. Title ar of Underly Securities	to respond B control n wned nd Amount lying s	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned	f 10. Ownershi Form of Derivative Security: Direct (D or Indirec	11. Natur p of Indired Beneficial Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Pruden Gary J C/O MOTUS GI HOLDINGS, INC., 1301 EAST BROWARD BOULEVARD, 3RD FLOOR FT. LAUDERDALE,, FL 33301	X					

Signatures

/s/ Andrew Taylor, power of attorney	02/11/2022
**Signature of Reporting Person	Date

Explanation of Responses:

- \star 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) The option award was made in accordance with the terms of the Issuer's 2016 Equity Incentive Plan (the "2016 Plan"). The option becomes exercisable as to 100% of the shares on February 10, 2023. The exercise price is based on the closing price for the shares of the Common Stock on the date of grant in accordance with the terms of the 2016 Plan.

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.