FORM 4

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

OMB APPROVAL
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

| (Print or Ty | pe Response | s) | | | | | | | | | | | | | | |
|--|---|--|--|--|-----------------|--------|-------|--|--|--------------------------------|--|---|---|--|---|-------------|
| 1. Name and Address of Reporting Person* Pope Michael Ross | | | | 2. Issuer Name and Ticker or Trading Symbol FOCUS UNIVERSAL INC. [FCUV] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
| (Last) (First) (Middle) C/O FOCUS UNIVERSAL INC., 2311 EAST LOCUST COURT | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/23/2022 | | | | | | Office | er (give title belo | ow) | Other (specify | below) | | |
| (Street) ONTARIO, CA 91761 | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date any (Month/Day/Y) | | (Instr. 8) | | etion | 4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5) | | of (D) | Beneficia | ant of Securities ally Owned Following d Transaction(s) and 4) | | 6. Ownership Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | , | | | ode | V | Amoun | (A) or (D) | Price | | | | or Indirect (I) (Instr. 4) | (Instr. 4) |
| Common Stock 06/23/2022 | | | | | S 21,000 D \$ 6 | | \$ 6 | 30,150 | | I | See Footnote (1) | | | | | |
| Reminder: 1 | Report on a s | separate line fo | or each class of secur Table II - 1 | Derivati | ve Securit | ies Ac | quire | Personta conta the fo | ons wh ained ir orm dis | o respo this for plays a | rm are curre reficial | e not requesting ntly valid | OMB con | formation spond unle trol numbe | ess | 1474 (9-02) |
| 1 | | 1 | , | <u> </u> | s, calls, w | | | | | | | | | 1 | <u> </u> | |
| Security | 2. Conversion or Exercise Price of Derivative Security | se (Month/Day | Execution Day (ay/Year) any | Code Year) (Instr. 8) | Number and | | and I | ate Exercisable Expiration Date nth/Day/Year) | | Ame Und Seco | itle and ount of lerlying urities tr. 3 and | 8. Price of Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Owners Form o Derivat Security Direct (or Indir | ive Ownersh y: (Instr. 4) (ED) | |
| | | | | (| Code V | (A) | | Date Exer | | Expiratio Date | n Title | Amount or Number of Shares | | | | |

Reporting Owners

| | Relationships | | | | | |
|--|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| Pope Michael Ross C/O FOCUS UNIVERSAL INC. 2311 EAST LOCUST COURT ONTARIO, CA 91761 | X | | | | | |

Signatures

| /s/ Michael Pope | 07/08/2022 | |
|---------------------------------|------------|--|
| **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) The shares of Common Stock reported on this line are held by an entity owned and controlled by the Reporting Person.

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.