

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per response	e 0.5			

#### INITIAL STATEMENT OF 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 Type Responses)								
Name and Address of Reporting Person*  Segelman Chaya	2. Date of Event Requiring Statement (Month/Day/Year)  01/21/2016		3. Issuer Name and Ticker or Trading Symbol Reign Sapphire Corp [RSAP]					
9190 W OLYMPIC BLVD, # 263			4. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  X Director  X Officer (give title Other (specify below)  Secretary			5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) BEVERLY HILLS, CA 90212					Applicable I  X Form fi	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 Beneficially Owned					wned		
1.Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)		Owned		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock	2,500,000			D				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  SEC 1473 (7-02)  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 control number.  Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
(Instr. 4) and (N	fonth/Day/Year) Security (Instr. 4)		Underlying Derivative	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
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### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Segelman Chaya 9190 W OLYMPIC BLVD # 263 BEVERLY HILLS, CA 90212	X		Secretary		

# **Signatures**

/s/ Chaya Segelman	02/09/2016
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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.

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.