FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number: 3235-0104

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					OI OCCIOII O	o(ii) or the iii	vestment Company Act of 1940				
1. Name and Address of Reporting Person* BURNS MICHAEL F JR			2. Date of Event Requiring Statement (Month/Day/Year) 11/09/2019			3. Issuer Name and Ticker or Trading Symbol RAVE RESTAURANT GROUP, INC. [RAVE]					
(Last) 3551 PLANO PARKY	(First) (Middle) PLANO PARKWAY				Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Chief Operating Off		10% Owner Other (specify below) ficer		5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) THE COLONY TX 75056 (City) (State) (Zip)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount o (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)				2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Deri (Instr. 4)		4. Conversion Exercise Pric of Derivative Security			6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Date Expira Exercisable Date		Title		Amount or Number of Shares	Security				

Explanation of Responses:

Remarks:

No securities are beneficially owned.

STEVEN D. DAVIDSON, As Attorney-In-Fact 11/18/2019

for Michael F. Burns, Jr.

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

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* 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.

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 Number.

SECTION 16 POWER OF ATTORNEY

Know all by these presents, that I, Mike Burns, hereby constitute and appoint Steven D. Davidson as my true and lawful attorneys-in-fact to:

- (1) Execute for me and on my behalf, in my capacity as an officer and/or director of Rave Restaurant Group, Inc. (the "Company"), Forms 3, 4, and 5 with respect to 1
- (2) Do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form 3, 4, or 5, complete any
- (3) Take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best :

The undersigned hereby grants to such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary,

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect to the benefic:

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 14th day of November, 2019.

/s/ Mike Burns