| SEC Form 4 |  |
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#### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| Check this box if no longer subject to | J |
| Section 16. Form 4 or Form 5           |   |
| obligations may continue. See          |   |
| Instruction 1(b).                      |   |

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

# OMB APPROVAL OMB Number: 3235-0287 Estimated average burder hours per response: 0.5

| 1. Name and Address of Reporting Person <sup>*</sup><br>SEIFERT KATHI P          |                                       |  | 2. Issuer Name and Ticker or Trading Symbol<br><u>REVLON INC /DE/</u> [ REV ] |                        | ationship of Reporting Person(s) to Issuer<br>( all applicable)<br>Director 10% Owner |                       |  |  |  |  |
|--|---------------------------------------|--|---|------------------------|---|-----------------------|--|--|--|--|
| (Last)<br>237 PARK AVI   | st) (First) (Middle)<br>7 PARK AVENUE |  | 3. Date of Earliest Transaction (Month/Day/Year)<br>08/15/2006                | 1                      | Officer (give title below)  | Other (specify below) |  |  |  |  |
| (Street)<br>NEW YORK NY 10017<br>(City) (State) (Zip)                            |                                       |  | 4. If Amendment, Date of Original Filed (Month/Day/Year)                      | 6. Indiv<br>Line)<br>X | ,   |                       |  |  |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |                                       |  |   |                        |   |                       |  |  |  |  |

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transa<br>Code (<br>8) |   |        |               | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |          |
|---------------------------------|--|---|------------------------------|---|--------|---------------|---|---|---|----------|
|                                 |  |   | Code                         | v | Amount | (A) or<br>(D) | Price   | Transaction(s)<br>(Instr. 3 and 4)                                |   | (1130.4) |
| Class A Common Stock            | 08/15/2006                                 |   | Р                            |   | 66,000 | Α             | \$1.26  | 100,000   | D   |          |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 6. Date Exercisable and 8. Price of Derivative 1. Title of 7. Title and 9. Number of 3. Transaction 3A. Deemed 5. Number 10. 11. Nature Derivative Security (Instr. 3) Conversion Execution Date Transaction Expiration Date (Month/Day/Year) Amount of derivative Ownership of Indirect Date (Month/Day/Year) of Derivative Code (Instr. 8) Securities Security (Instr. 5) or Exercise if anv Securities Form: Beneficial Beneficially Owned Price of Derivative (Month/Day/Year) Securities Underlying Direct (D) Ownership (Instr. 4) or Indirect (I) (Instr. 4) Acquired Derivative (A) or Disposed Following Reported Security Security (Instr. 3 and 4) of (D) (Instr. 3, 4 and 5) Transaction(s) (Instr. 4) Amount o Number Expiration Date of Code ν (A) (D) Exercisable Date Title Shares

Explanation of Responses:

#### <u>/s/ Robert K. Kretzman for</u> <u>Kathi P. Seifert pursuant a</u>

08/16/2006

Power of Attorney

Date

\*\* Signature of Reporting Person

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 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).

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.