FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APP	ROVAL
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## 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

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

Name and Address of Reporting Person*     BERNIKOW ALAN S					2. Issuer Name <b>and</b> Ticker or Trading Symbol REVLON INC /DE/ [ REV ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
BERTHOWTEHING															X	Direc	ctor		10% C	wner	
(Last) (First) (Middle) C/O REVLON, INC.						3. Date of Earliest Transaction (Month/Day/Year) 12/09/2008										Offic belov	er (give title v)		Other (specify below)		
237 PARK AVENUE					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														-	X	Forn	n filed by One	e Repoi	rting Pers	on	
NEW YO	ORK N	Y 1	.0017											Form filed by More than One Reporting Person							
(City)	(St	ate) (	Zip)																		
		Tabl	e I - No	n-Deriv	ative	Se	curitie	s Ac	quired,	, Dis	posed o	f, or	Bene	efici	ally	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Da			3. Transaction Code (Instr. 8)						4 and Se Be Ov		ecurities F eneficially (		nership Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D) Pr		Price	•	Transa	action(s) 3 and 4)			(	
Class A Common Stock <sup>(1)</sup>				12/09	9/2008						10,750	) <sup>(2)</sup> A		\$	15,750		5,750 <sup>(3)</sup>		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				Transaction Code (Instr. 3)		mber ative rities ired osed . 3, 4	6. Date E Expiratio (Month/I	on Dat		Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of Sha								

## **Explanation of Responses:**

- 1. Revlon, Inc., the issuer, completed a 1-for-10 reverse stock split on 9/15/08 in which each 10 shares of the issuer's common stock were combined and reduced to 1 share. Accordingly, the shares reported in this Form 4 are adjusted for the 1-for-10 reverse stock split.
- 2. On 12/9/08, the reporting person was granted restricted stock covering 10,750 shares of Revlon, Inc. Class A Common Stock under the Third Amended and Restated Revlon, Inc. Stock Plan. The restricted stock was not vested on the date of grant. One-third of the shares vest on each of 1/10/10, 1/10/11 and 1/10/12.
- 3. Of the reporting person's other 5,000 shares previously reported as beneficially owned, 3,333 are unvested restricted shares, 833 of which vest on 1/2/09, 833 of which vest on 1/2/10 and 834 of which vest on 1/2/11.

/s/ Robert K. Kretzman for Alan S. Bernikow pursuant to a 12/10/2008 Power of Attorney

\*\* 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 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.