## Edgar Filing: TG THERAPEUTICS, INC. - Form 4

TG THERAPE	UTICS, INC.										
Form 4 July 08, 2016											
•	Л								OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP O SECURITIES					Expires: January 31 200 Estimated average burden hours per		
Form 5 obligations may continu <i>See</i> Instructi 1(b).	e. Section 17(a	a) of the	· · ·	ity Holdin	ig Compa	any A	ct of	Act of 1934, 1935 or Sectior )	response	0.5	
(Print or Type Res	ponses)										
Hoberman Kenneth Symbol				Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle) 3. Date of Earliest Transaction				]	(Check all applicable)					
(M			•	(Month/Day/Year) 07/06/2016				_X_ Director Officer (give t below)			
	(Street) 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				
NEW YORK,	NY 10014							Form filed by M Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execut any	eemed tion Date, if h/Day/Year)	Code	4. Securiti r(A) or Dis (D) (Instr. 3, 4 Amount	posed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
COMMON STOCK	07/06/2016			A <u>(1)</u>	12,459	A	\$0	86,905 <u>(2)</u>	D		

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

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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
Hoberman Kenneth 2 GANSEVOORT S NEW YORK, NY 1	Х							
Signatures								
/s/ Kenneth Hoberman	07/08/2016							
<u>**</u> 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) Reflects a grant of restricted shares that will vest on June 14, 2019.
- (2) Includes 5,556 warrants to purchase Common Stock at \$2.25, exercisable through January 31, 2017.

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.