ONE Group Hospitality, Inc.

Form 4

February 11, 2016

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

OMB Number:

3235-0287

0.5

Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005

OMB APPROVAL

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response...

5. Relationship of Reporting Person(s) to

Issuer

subject to Section 16. Form 4 or Form 5

obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

2. Issuer Name and Ticker or Trading

SECURITIES

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

Symbol

1(b).

(Print or Type Responses)

Serruya Michael

1. Name and Address of Reporting Person *

| 3022 W.J. 2222 W.J. | | | ONE Group Hospitality, Inc. [STKS] | | | | | TKS] | (Check all applicable) | | | |
|--|------------|---|--|---|-----------|--------|---|---|--|--|-----------------|--|
| | | | e of Earliest Transaction h/Day/Year) 9/2016 | | | | | X Director 10% Owner Officer (give title below) Other (specify below) | | | | |
| | | | | endment, Date Original nth/Day/Year) | | | | | 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 Acquired, Disposed of, or Beneficially Owned | | | | | | | | | |
| 1.Title of Security (Instr. 3) | | . Transaction Date 2A. Deem Month/Day/Year) Execution any (Month/D | | 3. Transact Code (Instr. 8) | (A) or | | | of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock, par value \$0.0001 per share | 02/09/2016 | | | M | | 18,199 | A | \$ 2.75 | 53,279 | D | | |
| Common Stock, par value \$0.0001 per share | 02/09/2016 | | | M | | 45,018 | A | \$ 2.75 | 283,643 | I | See Footnote | |

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

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(9-02)

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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | Secu Acqu or D (D) | urities uired (A) isposed of r. 3, 4, | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amoun Underlying Securiti (Instr. 3 and 4) | |
|---|---|---|---|--|-----------------------------|--|--|--------------------|---|------------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amou or Numb of Sha |
| Subscription Rights (right to buy) | \$ 2.75 | 02/09/2016 | | M | | 18,199 | 01/15/2016 | 02/09/2016 | Common Stock, par value \$0.0001 per share | 18,1 |
| Subscription Rights (right to buy) | \$ 2.75 | 02/09/2016 | | M | | 45,018 | 01/15/2016 | 02/09/2016 | Common Stock, par value \$0.0001 per share | 45,0 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---------------------------------|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Serruya Michael | | | | | | |
| 411 WEST 14TH STREET, 2ND FLOOR | X | | | | | |
| NEW YORK, NY 10014 | | | | | | |

Signatures

/s/ Michael Serruya 02/11/2016 **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)

Reporting Owners 2

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45,018 shares of common stock, par value \$0.0001 per share, are held by MOS Holdings Inc. MOS Holdings Inc. is an entity owned by Michael Serruya.

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.