## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 OF SECURITIES

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

(Print or Type Responses)  1. Name and Address of Reporting Person * HILARIO EMANUEL N			2. Issuer Name and Ticker or Trading Symbol ONE Group Hospitality, Inc. [STKS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner X Officer (give title below) Other (specify below)  President and CEO						
(Last) (First) (Middle) 1624 MARKET ST., STE. 311			3. Date of Earliest Transaction (Month/Day/Year) 11/01/2019											
(Street) DENVER, CO 80202			4. If Amendment, Date Original Filed(Month/Day/Year)					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 Acqu					Acqui	nired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	(Instr. 8)	(A) or Disposed of (		f (D)	Beneficial Reported	t of Securities ly Owned Following Transaction(s)		6. Ownership Form:	Beneficial	
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 ai	3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	
Common St	tock		11/01/2019		A		42,088	A S	\$ 0	618,072			D	
Reminder: Rep	port on a se	eparate line for	each class of secur	ities beneficially ov	vned direct	Perso	ons who	o respond	n are	not requ		ormation spond unlestrol number	s	1474 (9-02)
Reminder: Rep	port on a se	eparate line for	Table II - l	Derivative Securiti	ies Acquir	Perso conta the fo	ons who ained in orm dis	o respond this form plays a c	n are urrer ficiall	not requently valid	ired to res	spond unles	s	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	onversion	3. Transaction Date (Month/Day/Y	Table II - 1  (3A. Deemed Execution Daear) any	Derivative Securities, puts, calls, wa  4. te, if Transaction Code Year) (Instr. 8)	ses Acquires for the securities Acquired (A) or Disposed of (D) (Instr. 3,	Personal representation of the following settings, and E (Month of the following settings).	ons who ained in orm dis	o respond this form plays a c f, or Bene ible securi isable n Date	ficiall fities) 7. Ti Amo Unde Secu	not requently valid	OMB cont	spond unles	f 10. Ownersi Form of Derivati Security Direct ( or Indire	11. Nation of Indirection Benefic Owners: (Instr. 4)
1. Title of 2. Derivative Security (Instr. 3) Pri De	onversion r Exercise rice of erivative	3. Transaction Date	Table II - 1  (3A. Deemed Execution Daear) any	Derivative Securiti (e.g., puts, calls, wa 4. te, if Transaction Code (Instr. 8)	ies Acquir arrants, op 5. Number of Derivative Securities Acquired (A) or Disposed of (D)	Persocontate the following the	ons who	o respond this form plays a c f, or Bene ible securi isable n Date	n are urrer ficiall ities) 7. Ti Amo Undd Secu (Insti 4)	e not requently valid  ly Owned  itle and ount of erlying urities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Owners: Form of Derivati Security Direct (i or Indirects)	11. Nat of Indir Benefic Owners : (Instr. 4

P ( 0 N (	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
HILARIO EMANUEL N 1624 MARKET ST. STE. 311 DENVER, CO 80202	X		President and CEO				

## **Signatures**

/s/ Linda Siluk, Attorney-in-Fact for Emanuel N. Hilario	11/05/2019
**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).

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.