## 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

Name and Address of Reporting Person * Angelis Dimitrios			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 Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 1624 MARKET STREET, SUITE 311			3. Date of Earliest Transaction (Month/Day/Year) 03/25/2020					-						
(Street) DENVER, CO 80202			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 Form filed by More than One Reporting Person					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					Acquii	lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		D	. Transaction Date Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year	(Instr. 8		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		f (D) Beneficia Reported		nt of Securities ally Owned Following Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial Ownership
				(World Bay Tear	Code	V	Amoun	(A) or (D)	Price	Instr. 3 and 4)			or Indirect (I) (Instr. 4)	
Common	Stock	0	3/25/2020		A		23,109	9 A 9	0	57,390			D	
					wned dire	Pers cont	ained in	n this forn	n are	not requ		spond unle	ss	1474 (9-02)
				Derivative Securit	ies Acqui	Pers cont the f	ained in form dis	n this forn splays a c of, or Bene	n are urren ficiall	not requ itly valid	ired to res		ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Ye	3A. Deemed Execution Data	e.g., puts, calls, wa 4. te, if Transaction Code (ear) (Instr. 8)	ies Acqui	Pers cont the f red, Di ptions. 6. D and (Mo	ained in form dis	n this form splays a coof, or Bene tible securionisable on Date	ficiallities) 7. Tit Amo Unde Secur	not required to the and count of erlying	ired to res	spond unle	f 10. Ownersh Form of Derivati Security Direct (I or Indire	11. Nation of Indir Benefic Owners (Instr. 4

D ( O N (	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Angelis Dimitrios 1624 MARKET STREET SUITE 311 DENVER, CO 80202	X					

## **Signatures**

/s/ Linda Siluk, Attorney-in-Fact for Dimitrios Angelis	03/26/2020
**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.