FORM 4

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

OMB APPROVAL
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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 Ty | pe Response | s) | | | | | | | | | | | | |
|--------------------------------------|--|---------------------|--|---|-------------|--------------|--|---------------------|-----------------------------|--|--|---|---|---|
| 1. Name an Segal Jor | | f Reporting Per | rson* | 2. Issuer Name at ONE Group Ho | | | | | | 5. Relation | (Che | oorting Perso | | er |
| (Last) | | First) S., SUITE 31 | (Middle) | 3. Date of Earliest 03/29/2020 | Transaction | n (Mo | onth/Day/ | Year) | | X_Office | er (give title bel Director, | ow) Business D | Other (specify evelopment | below) |
| DENVEI | R, CO 802 | (Street) | | 4. If Amendment, | Date Origin | nal Fi | led(Month/l | Day/Year) | | _X_ Form fil | ed by One Repo | Group Filing orting Person one Reporting | | ible Line) |
| (City |) | (State) | (Zip) | Ta | ble I - Non | -Der | ivative So | ecurities | Acqui | ired, Disp | osed of, or l | Beneficially | Owned | |
| 1.Title of S (Instr. 3) | ecurity | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | (Instr. 8) | ction | (A) or D (D) | isposed of 4 and 5) | of | Beneficial | t of Securiti lly Owned F Transaction nd 4) | ollowing | 6. Ownership Form: Direct (D) or Indirect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | V | Amount | (A) or (D) | Price | | | | (I) (Instr. 4) | (111311. 4) |
| Common | Stock | | 03/29/2020 | | F | | 3,132 (1) | D S | \$ 1.69 | 5,870,22 | 24 | | D | |
| Common | ı Stock | | | | | | | | | 386,166 | | | I | By Jonathan Segal 2012 Family Trust |
| Common | ı Stock | | | | | | | | | 1,000,00 | 00 | | I | By Jonathan Segal 2016 Family Trust #2 |
| Reminder: | Report on a | separate line for | r each class of secur | ities beneficially ow | | Pers | ons who | respon this for | m are | not requ | | formation spond unle | ess | 1474 (9-02) |
| | | | | Derivative Securitiese.g., puts, calls, wa | es Acquire | d, Di | sposed of | f, or Bene | eficial | • | | | | |
| Derivative Security (Instr. 3) | Derivative Conversion Date or Exercise (Mo | | 3. Transaction 3A. Deemed | | 5. | 6. Da | tte Exercisable Expiration Date htth/Day/Year) | | 7. Ti Amo Und Secu | itle and ount of erlying irrities r. 3 and | Derivative Security (Instr. 5) | Derivative Securities Beneficiall Owned Following Reported | ties Form of Cially Derival Security Direct or Indiction(s) | ive Ownershi (Instr. 4) (D) eect |
| | | | | Code V | (A) (D) | Date Exer | | Expiration Date | Title | Amount or Number of Shares | | | | |

Reporting Owners

| | | | Relationships | |
|-----------------------------------|----------|--------------|---------------|-------|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other |
| | | | | |

| Segal Jonathan 1624 MARKET ST. SUITE 311 DENVER, CO 80202 | X | | Director, Business Development | | |
|--|---|--|--------------------------------|--|--|
|--|---|--|--------------------------------|--|--|

Signatures

| /s/ Linda Siluk, as attorney in fact for Jonathan Segal | 03/31/2020 |
|---|------------|
| **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).
- (1) Shares of common stock were withheld by the Company to cover withholding taxes upon the vesting of restricted stock units.

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.