# FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
hours per response	0.5				

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	es)														
1. Name and Address of Reporting Person * Fierro Celeste				2. Issuer Name and Ticker or Trading Symbol ONE Group Hospitality, Inc. [STKS]							5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) (First) (Middle) 3. Date of 06/05/20					Pate of Earliest Transaction (Month/Day/Year) 05/2014						X Officer (give title below) Other (specify below)  See Remarks				)	
(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  Form filed by More than One Reporting Person				9)	
(Ci	ORK, NY 1	(State)	(Zip)			Tabl	le I - N	Von-Deri	vative Se	curities	Acquire				-d	
1.Title of S (Instr. 3)	1.Title of Security 2. Transaction Date			2A. Deemed Execution Date, if		e, if Co	3. Transaction Code (Instr. 8)		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)  (A) or Amount (D)		uired 5. O Tr	Owned Following Reported Ownership of Form: Be		Beneficial Ownership		
Common per share	· •	value \$0.0001	10/01/2015				G		11,250	A		342,061 (1)			)	
Common per share		value \$0.0001	04/08/2016				A	1	25,000	A	\$ 0 4	467,061 <sup>(2)</sup>		]	)	
								form d	isplays	a curre or Bene	ently val	id OMB co		d unless the ber.		
1. Title of Derivative Conversion or Exercise (Instr. 3) Price of Derivative Security (Month/Day/Year) 3A. Deemed Execution Date, any (Month/Day/Year)		3A. Deemed Execution Date, if	(e.g., puts, calls, warran 4. 5. Number Transaction Derivative Securities			e Expiration Date of Unc (Month/Day/Year) Securi (Instr.			ficially O	Owned  e and Amount lerlying Derivative Security Securities  Owned  8. Price of Derivative Derivative Security		9. Number of Derivative Securities Beneficially Owned	Ownership of Indirection  Form of Benefic  Derivative Owners  Security: (Instr. 4	Beneficial Ownership (Instr. 4)		
	Security				(Ir	(D) nstr. 3, 4 id 5)	4,							Reported Transaction(s)		
				Code	v	(A)		Date Exercisab	Expira le Date	ation	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Option to Purchase Common Stock, par value		06/05/2014		A	25	50,000		(3)	06/05	5/2024	Commo Stock, par valu	250,000	\$ 0	0	D	

# **Reporting Owners**

Description Common Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Fierro Celeste							
411 WEST 14TH STREET, 2ND FLOOR			See Remarks				
NEW YORK, NY 10014							

### **Signatures**

/s/ Celeste Fierro	04/22/2016
**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) These gifted shares are being reported late due to an inadvertent administrative error.
- (2) Of the shares of common stock reported, 125,000 are represented by restricted stock units that will vest in equal increments upon the first five anniversaries of the grant date, with 25,000 units vesting on each such date.

These options vest ratably over a five year period on the anniversary of the date of grant. These options are being reported late due to an inadvertent administrative error.

#### Remarks:

Title: Senior Vice President of Marketing, Sales and Events

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.