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

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

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

1. Name and Address of Reporting Person * Siluk Linda			2. Issuer Name and Ticker or Trading Symbol ONE Group Hospitality, Inc. [STKS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 411 W. 14TH STREET, 2ND FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 06/11/2019						X Officer (give title below) Other (specify below) Chief Administrative Officer						
(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						
NEW YO	ORK, NY	(State)	(Zip)												
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of S (Instr. 3)	nstr. 3) Date		2. Transaction Date (Month/Day/Year)	any	Execution Date, if		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficial	ally Owned Following Transaction(s)		Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
						Code	V	Amount (A) or (D) Price					or Indirect (I) (Instr. 4)	(Instr. 4)	
Commor	Common Stock		06/11/2019			F		2,816 D	\$ 3.3	67,217		I	D		
Reminder:	Report on a s	separate line for	each class of securi	ities beneficiall	y ow	ned direc	Pers	sons who	respor this for	m are	not requ		spond unle	ss	1474 (9-02)
Reminder:	Report on a s	separate line for	Table II - I	Derivative Seco	uritie	es Acquir	Pers cont the t	sons who tained in form dis	o respore this for plays a of	m are curre eficial	not requesting ntly valid	ired to res		ss	1474 (9-02)
		separate line for	Table II - I	Derivative Secu	uritie	es Acquin	Pers cont the t	sons who tained in form dis	o respore this for plays a of this fer Ben ible security.	m are curre eficial rities)	not requesting ntly valid	ired to res	spond unle	ss r.	1474 (9-02)
		3. Transaction Date	Table II - I (a 3A. Deemed Execution Datear)	Derivative Seco	SAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	es Acquin	Personn the 1 red, D ptions 6. D and (Mo	sons who tained in form dis isposed o	o respor this for plays a of f, or Ben ible secur isable n Date	eficial rities) 7. Tanda Und Seco	e not requ ntly valid lly Owned	OMB conf	spond unle	of 10. Owners Form of Derivati Security Direct (or Indire	11. Nat of Indir Benefic Owners (Instr. 2

reporting Owners

D 11 0 N 1		Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Siluk Linda 411 W. 14TH STREET 2ND FLOOR NEW YORK, NY 10014			Chief Administrative Officer					

Signatures

/s/ Linda Siluk	06/12/2019
**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)
- (1) Shares of common stock were withheld by the issuer 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.