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

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 or 15(d) of the
Securities Exchange Act of 1934

Date of report (Date of earliest event reported): **September 27, 2013**

TG Therapeutics, Inc.
(Exact Name of Registrant as Specified in Charter)

Delaware	**001-32639**	**36-3898269**
(State or Other Jurisdiction of Incorporation)	(Commission File Number)	(IRS Employer Identification No.)

787 Seventh Ave, 48th Floor
New York, New York 10019
(Address of Principal Executive Offices)

(212) 554-4484
(Registrant's telephone number, including area code)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

£ Written communications pursuant to Rule 425 under the Securities Act.
£ Soliciting material pursuant to Rule 14a-12 under the Exchange Act.
£ Pre-commencement communications pursuant to Rule 14d-2b under the Exchange Act.
£ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act.

Item 8.01. Other Events.

On September 27, 2013, Michael Weiss, the Interim Chief Executive Officer of TG Therapeutics, Inc. (the "Company") will present at BioCentury's NewsMakers in the Biotech Industry Conference being held at the Millennium Broadway Hotel in New York, New York. A live webcast of this presentation will be available on the Events page of the Company's website at www.tgtherapeutics.com. A copy of Mr. Weiss' presentation is being filed as Exhibit 99.1.

Item 9.01 Financial Statements And Exhibits.

(d) Exhibits.

99.1 TG Therapeutics Corporate Presentation, dated September 27, 2013.

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

TG Therapeutics, Inc.
(Registrant)

Date: September 27, 2013

By: /s/ Sean A. Power
Sean A. Power
Chief Financial Officer

INDEX TO EXHIBITS

Exhibit Number	Description
99.1	TG Therapeutics Corporate Presentation, dated September 27, 2013.

TG Therapeutics

NASDAQ: TGTX

September 2013

Forward Looking Safe Harbor Statement

This presentation contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. These statements are often, but not always, made through the use of words or phrases such as "anticipates", "expects", "plans", "believes", "intends", and similar words or phrases. Such statements involve risks and uncertainties that could cause TG Therapeutics' actual results to differ materially from the anticipated results and expectations expressed in these forward-looking statements. These statements are only predictions based on current information and expectations and involve a number of risks and uncertainties. Actual events or results may differ materially from those projected in any of such statements due to various factors, including the risks and uncertainties inherent in clinical trials, drug development, and commercialization. You are cautioned not to place undue reliance on these forward-looking statements, which speak only as of the date hereof. All forward-looking statements are qualified in their entirety by this cautionary statement and TG Therapeutics undertakes no obligation to update these statements, except as required by law.

TG Therapeutics, Inc.

- Emerging biopharmaceutical company focused on cancer & autoimmune-related diseases

- Formed as a spin-out from LFB Biotechnologies, a French pharmaceutical company in January 2012
  - $0.5B sales
  - Private company, sole shareholder the French government

- Developing two drugs for B-cell cancers – Leukemia and Lymphoma

  - **TG-1101** – Novel Glyco-Engineered, Anti-CD20 monoclonal antibody
    Same class as Rituxan®, which has ~$7BB WW Sales
    Enhanced ADCC profile to increase potency
    Activity demonstrated in CLL and NHL in Phase 1/2 studies

  - **TGR-1202** – Novel PI3Kδ inhibitor
    Same class as CAL-101 and IPI-145
    Currently in Phase 1 dose escalation study
    Potential best in class attributes

Treatment of B-cell cancers
Evolving market dynamics

Today…

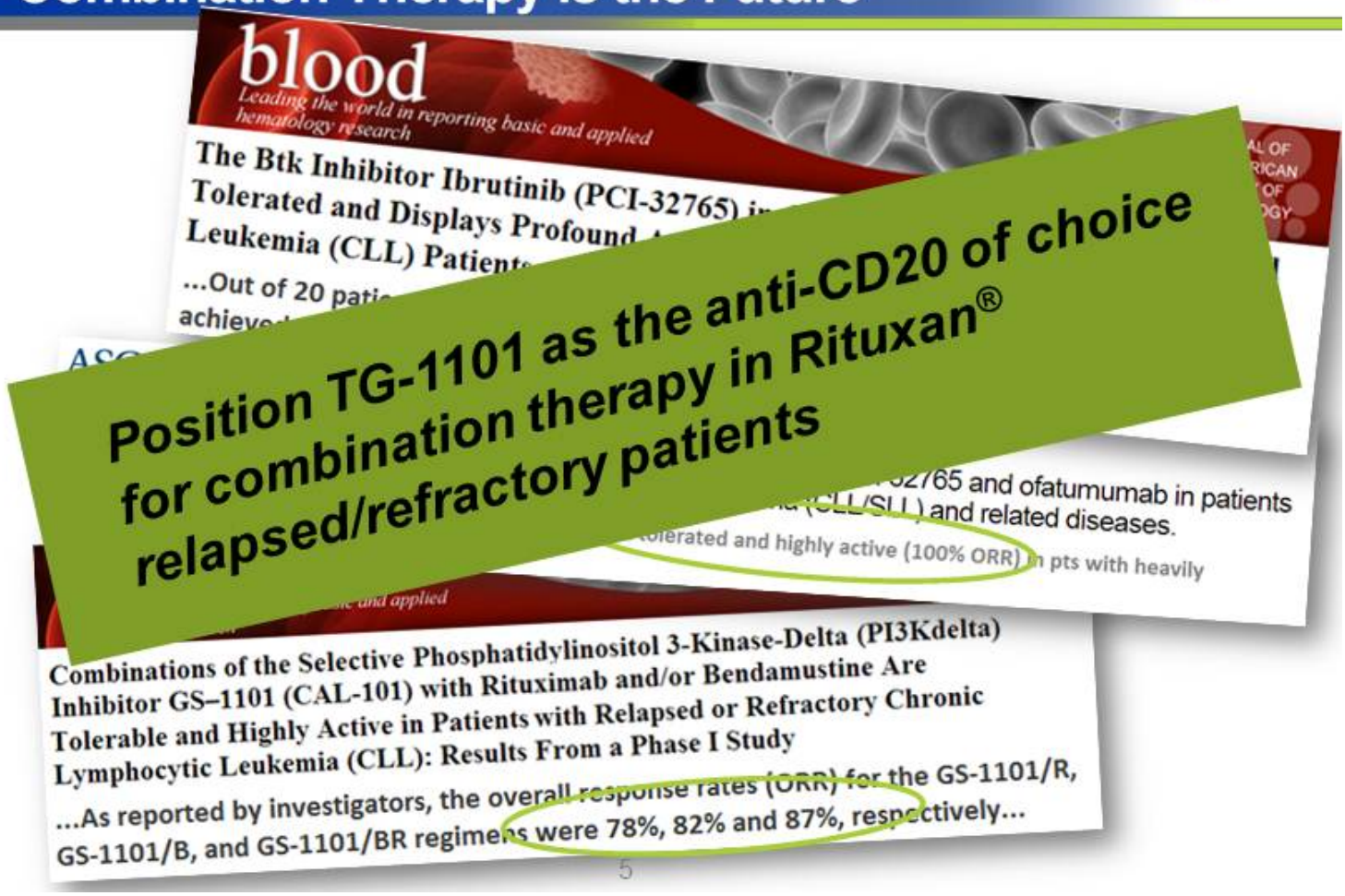
Treatment	Line of Therapy	Sales
Rituxan	1st and 2nd	~$5B
Bendamustine	1st and 2nd	~$1B
CHOP	1st and 2nd	Nominal
Chemotherapy	3rd and Salvage	Nominal

Future…non-chemotherapy-based combinations, with:

- **Anti-CD20's continuing to be the backbone; and**
- **Novel kinase inhibitors**
  - **BTK inhibitors**
  - **PI3K Delta inhibitors**

Market opportunity could easily double in next 5-10 years

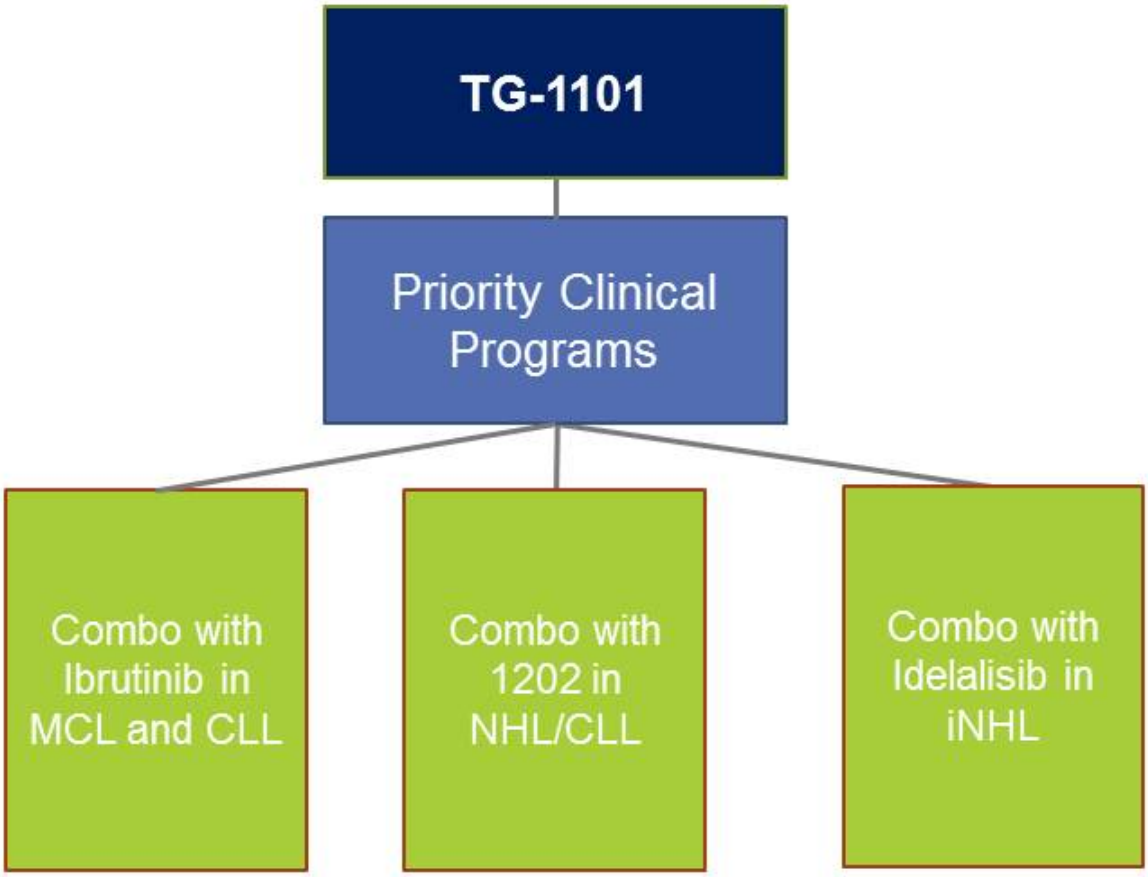
Anti-CD20 + Kinase Inhibitor Combination Therapy is the Future



Anti-CD20 Landscape

mAb's	Company	Attribute	Status
Rituxan (rituximab)	Roche	Type 1, Chimeric	Approved NHL, CLL, RA, GPA, MPA
Arzerra (Ofatumumab)	Genmab/GSK	Type 1, high CDC	Approved R/R CLL
GA101 (Obinutuzumab)	Roche	Type 2, high ADCC, PCD	Phase III (primarily frontline settings)
TG-1101 (ublituximab)	TG Therapeutics	Type 1, high ADCC	Ph I/II Single Agent and Combo w/Revlimid ongoing in Rituxan Rel/Ref NHL, CLL

Multiple Pathways for Regulatory Approval

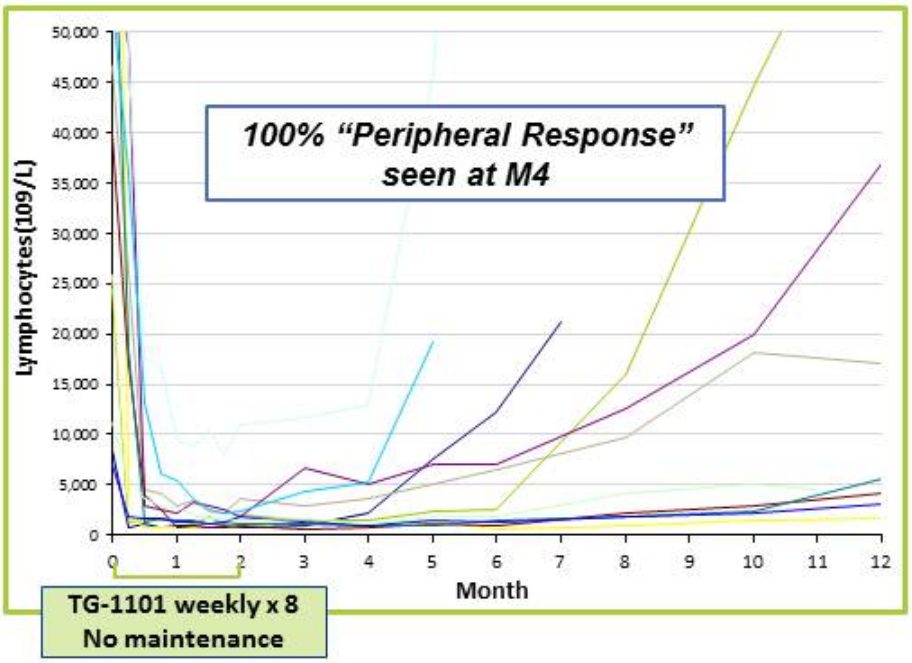


TG-1101 (ublituximab)

- Same target (CD20) as Rituxan® but **NOT** a biogeneric or biosimilar
- Unique protein sequence
- Potential advantages over current standard of care:
  - Glycoengineered to enhance the cell killing effects of the body's immune response—(Antibody Dependent Cellular Cytotoxicity)
  - Demonstrated activity in "low" CD20 expressing tumors, a characteristic of Rituxan® resistance
  - Binding to novel epitope on the CD20 antigen, which may also aid in overcoming Rituxan® resistance

TG-1101 in the Treatment of Rel/Ref CLL
Phase 1b Efficacy Results

	Part II
Patients	12
Evaluable	11*
CR	0
PR at M4	7 (63.6%)
SD at M4	4
PD at M4	0
PR at M6	5 (45.5%)



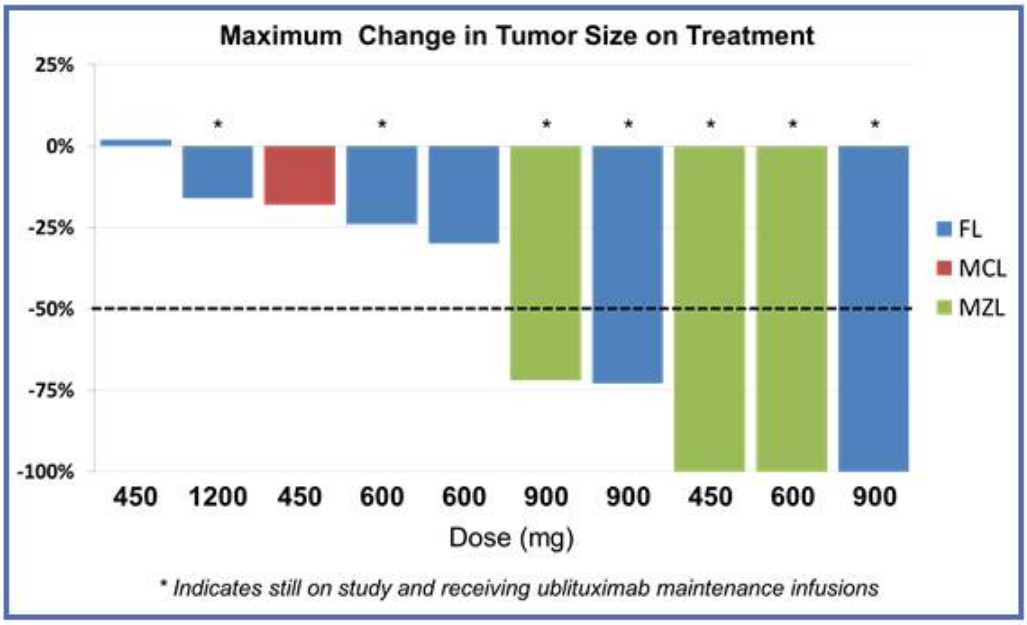
- In a pivotal study of rituximab monotherapy in patients with previously treated CLL/SLL, an overall response rate of **13%** was observed.[1]

*pt: premature withdrawal for secondary acute leukemia

[1] *McLaughlin et al, 1998*

ASCO 2013 Presentation:
TG-1101 Phase 1 Efficacy Results in Rel/Ref NHL

- 10/12 patients were evaluable for efficacy (2 patients were too early for response assessment)
- 5 patients achieved an objective response (3 CRs, 2 PRs)



90% of evaluable patients had a reduction in target lesion

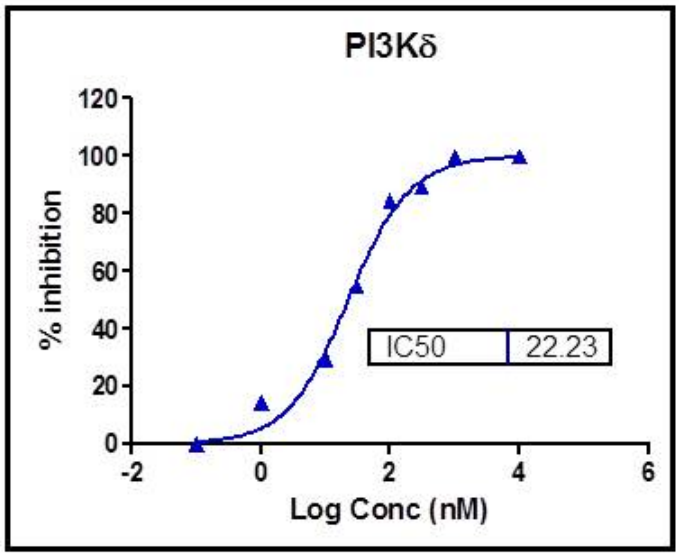
Upcoming Combination Trials

- **TG-1101 in Combination with Ibrutinib**
  - **Eligibility:** CLL and MCL (as per ibrutinib label)
  - **Sites:** 20-30 Centers
  - **Status**: Site review/contracts
  - **Target Start Date:** Prior to October 30, 2013; awaiting ibrutinib approval
  - **Lead Centers:** USON and Columbia University

- **TG-1101 in Combination with TGR-1202**
  - **Eligibility:** all B-Cell Lymphomas and CLL
  - **Sites**: 7-10 Centers
  - **Status**: IRB Review
  - **Target Start Date:** Before YE2013
  - **Lead Center:** MD Anderson

TGR-1202
(PI3K-δ INHIBITOR)

Enzyme Specificity

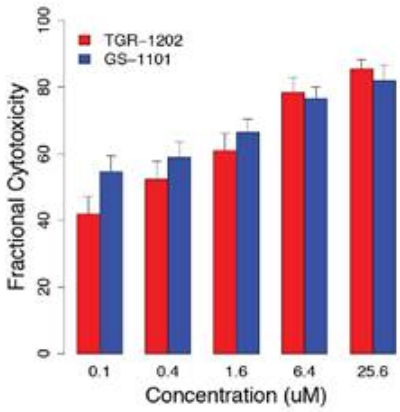


Fold-selectivity				
Isoform	α	β	γ	δ
TGR-1202	>10000	>50	>48	1
[1]Idelalisib	>300	>200	>40	1
[2]IPI-145	>640	>34	>11	1

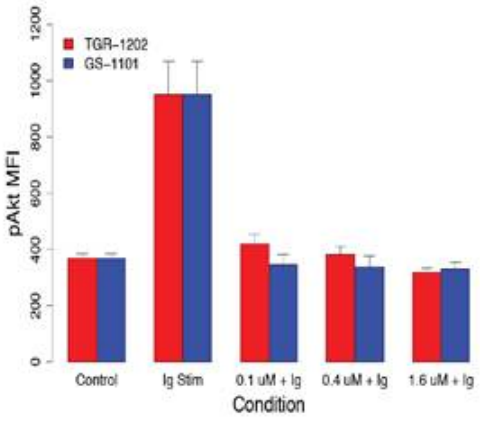
[1]Flinn et al. 2009, [2]Porter et al. 2012

TGR-1202 vs. Idelalisib

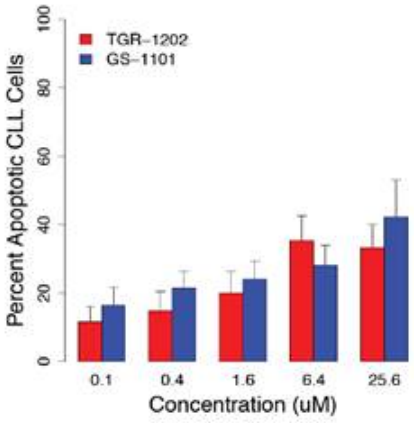
- Blinded *in vitro* study conducted at Duke University comparing TGR-1202 and Idelalisib in CLL patient cells (n=7)



Equivalent dose dependent cytotoxicity



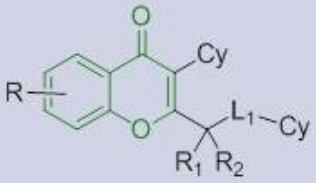
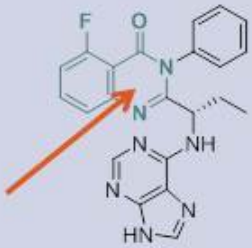
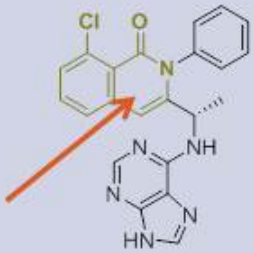
Equivalent suppression of pAKT



Equivalent dose dependent induction of apoptosis

Friedman et al 2012, ASH Poster

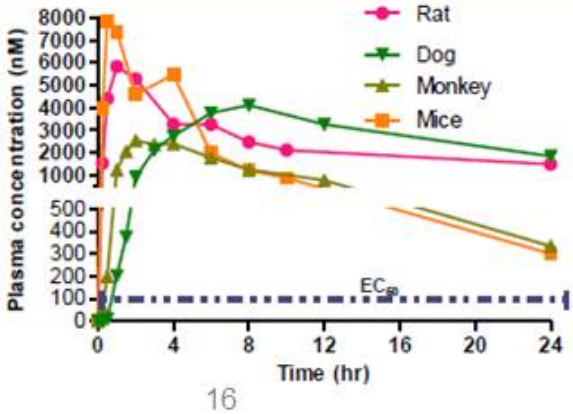
Structural Comparisons

TGR-1202	Idelalisib	IPI-145
		

- Idelalisib and IPI-145 structure displays very high similarity (over 80% homologous) and contain nitrogen based heterocyclic backbones known to interact with hepatic enzymes
- TGR-1202 structure (not yet disclosed) has different backbone designed to potentially minimize toxicity while preserving delta specificity

Pre-Clinical Pharmacokinetics of TGR-1202

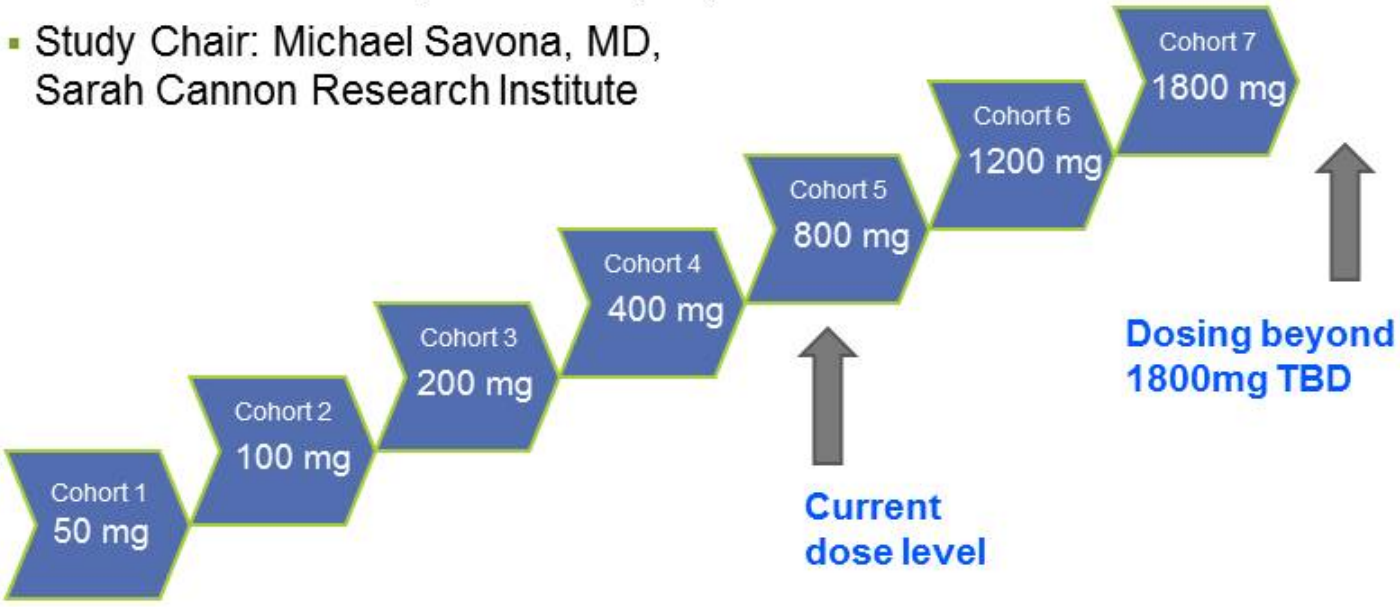
Parameter	Units	Mice	Rat	Dog	Monkey
Dose	mg/kg	20	20	30	50
C_{max}	µM	7.81	6.08	4.21	2.68
AUC_{0-t}	µM.hr	33.96	59.41	94.86	29.29
AUC_{0-inf}	µM.hr	34.02	105.01	172.65	30.73
T_{max}	hr	0.50	1.50	7.00	3.00
$t_{½}$	hr	2.39	17.85	37.13	10.17



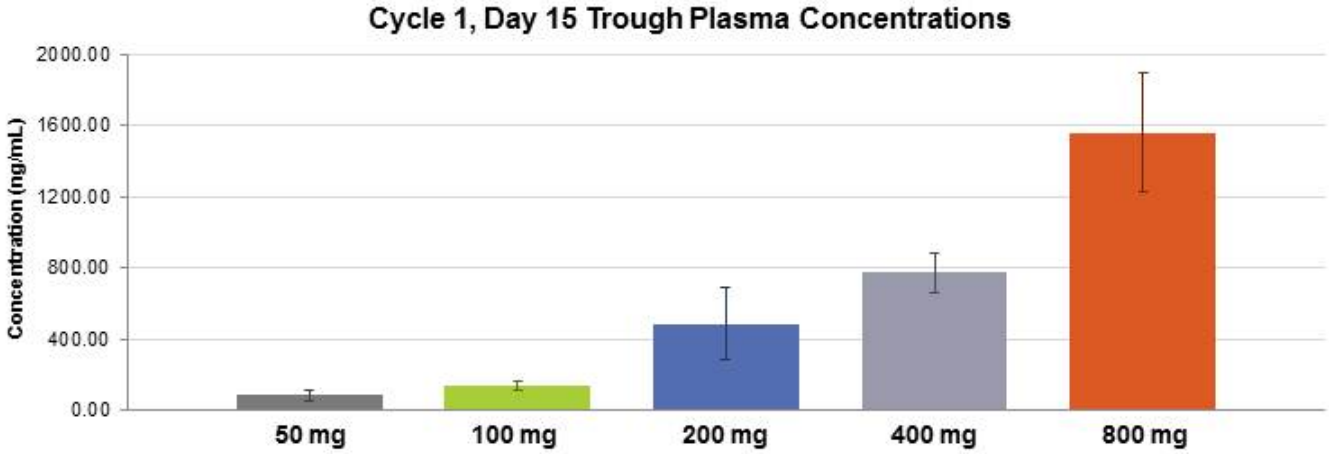
TGTX/Rhizen Internal Data

Phase I First-in-Human Study of TGR-1202
Patients with Rel/Ref Hematologic Malignancies

- Includes Patients with Relapsed/Refractory Hematologic Malignancies
- No limit on prior therapies
- Continuous once daily oral dose (QD)
- Study Chair: Michael Savona, MD, Sarah Cannon Research Institute

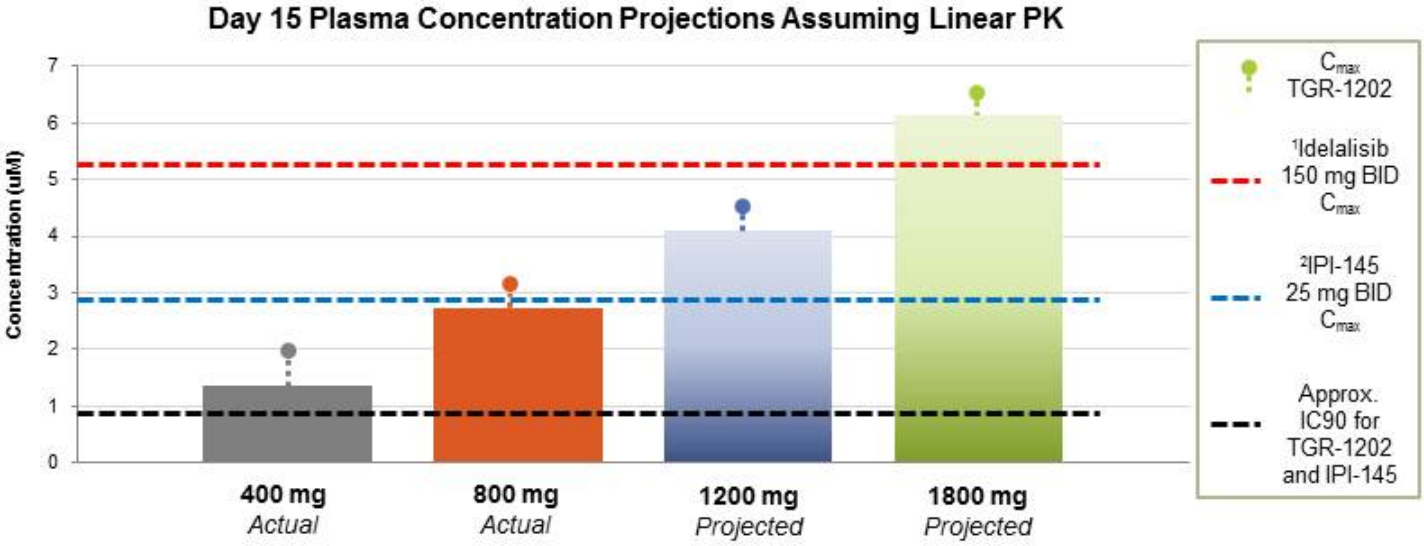


TGR-1202:
Preliminary Human Pharmacokinetics



- TGR-1202 is rapidly absorbed with a linear PK profile through 800 mg QD (highest dose administered to date)
- Extended half life combined with accumulation support **once daily dosing regimen**

TGR-1202: Preliminary Human Pharmacokinetics



- Plasma concentrations approaching bottom end of range for projected clinical efficacy
- Assuming linearity of PK parameters continues, subsequent dose levels projected to provide therapeutic levels of drug exposure

[1]Brown et al, ICML 2013; [2]Patel et al ASCO 2013

TGR-1202: Preliminary Findings

- Extended half-life supports 1x daily dosing
- Linear PK through 800mg qd
- Only one DLT observed: Gr. 3 rash at 800mg possibly related to study drug
  - Rash resolved and patient restarted without recurrence
- No drug related hepatotoxicity observed to date
  - Single incident of Gr. 1 elevated GGT at a lower dose, deemed unrelated
- Delta-like activity and disease control beyond 6 months observed

Upcoming Milestones

News Flow through mid-2014

Nov. '13	Commence TG-1101 plus Ibrutinib combo trial
Dec. '13	Commence TG-1101 plus TGR-1202 combo trial
Dec. '13	Present additional Ph. 1/2 single agent TG-1101 data
Dec. '13	Present preliminary safety and efficacy of TGR-1202
April '14	Commence TG-1101 plus Idelalisib combo trial
June '14	Present preliminary data from combo trials
June '14	Commence combination registration trials

Corporate & Financial

Key Statistics

Ticker:	**TGTX (NasdaqCM)**
Price:	**$6.15**
Shares:	**~33M (Primary); ~39M (fully-diluted)**
Cash:	**~$51M (pro forma June 30, 2013, including July capital raise)**
Burn:	**$2-$3M per quarter**
Time:	**30-36 months of cash**

Key Takeaways

- Unequivocal activity of TG-1101 in CLL and NHL
- Positioning TG-1101 as the backbone of combination therapy in Rituxan® relapsed/refractory patients, a multi-billion dollar opportunity
- Multiple combination regulatory pathways for TG-1101
- Novel PI3K Delta inhibitor with potential best in class attributes
  - Dramatic results when PI3K Delta's are combined with CD20's, approaching 100% ORR

TG Therapeutics

NASDAQ: TGTX