FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APF | OMB APPROVAL | | | | | | | | |
|--------------------------|--------------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per respons | e· 0.5 | | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* | | | | | 2. Issuer Name and Ticker or Trading Symbol TG THERAPEUTICS, INC. [TGTX] | | | | | | | | (Chec | k all app Direc | tionship of Reportin all applicable) Director Officer (give title | | g Person(s) to Issuer 10% Owner Other (speci | | | |
|---|--|--------|-----------------|---|--|-----------------|----------------------------------|--|-----------------|--|---|------------------------------------|-----------------------------------|-------------------------------|--|---|--|--|--|--|
| (Last) 2 GANS | (Fir EVOORT S | st) (M | Middle) LOOR | | 3. Date of Earliest Transaction (Month/Day/Year) 01/04/2022 | | | | | | | | | X | belov | v) | y and | below) and Treasurer | | |
| (Street) NEW YO | | | 0014 Zip) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | |) | 6. Indi Line) X | Form | or Joint/Group Filing (Check Applicable in filed by One Reporting Person in filed by More than One Reporting on | | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired | , Dis | posed of | , or E | Benef | icially | / Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 4 and Sec Ben | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | Amount | (A) (D) | or Pr | ice | Transa | Transaction(s) (Instr. 3 and 4) | | | (3 4) | | | | | |
| COMMON STOCK 01/04/2 | | | | | | 022 | | S | | 75,312 ⁽¹⁾ | Г | \$ | 19.2 | 57 | 8,136 | | D | | | |
| COMMON STOCK 01/05/2 | | | | | 022 | | | S | | 9,653 ⁽¹⁾ D \$ | | 18.31 | 568,483(2) | | | D | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year) | | | | 4. Transaction Code (Instr. 8) | | of | ired r osed) : 3, 4 | 6. Date Exerc Expiration Da (Month/Day/Y | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | Dei Sed (Ins | rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y D | 0. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amou or Numb of Share | er | | | | | | |

Explanation of Responses:

1. In connection with the vesting of 160,000 shares on January 1, 2022, these shares were sold by the Company's restricted stock administrator in order to satisfy Mr. Power's tax withholding obligations. Mr. Power had no discretion with respect to such sale, which was transacted automatically in accordance with the Company's corporate policies regarding the vesting of restricted stock.

2. Includes shares of restricted Common Stock, which are subject to vesting and 140,000 shares of TG Therapeutics stock issuable pursuant to stock options that are currently exercisable or exercisable within 60 days of this filing.

/s/ Sean A Power

01/05/2022

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.