FORM 4

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

| OMB APPROVAL | | | | | |
|--------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
| Estimated average burden | | | | | |
| nours 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).

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

| (Finit of Ty | pe Response | :8) | | | | | | | | | | | | | | | | | | |
|--|---|----------------------------|--------------------------------------|--|---|--------------------|-------------------------------|--|---|--------------|---------------------|--|--|-------|------------------------------|---------------|-------------------------------|---|-----|-------------------|
| Name and Address of Reporting Person * Marovitz Daniel | | | | 2. Issuer Name and Ticker or Trading Symbol Professional Diversity Network, Inc. [IPDN] | | | | | | | 5 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | | | |
| (Last) (First) (Middle) C/O PROFESSIONAL DIVERSITY NETWORK, INC., 801 W. ADAMS STREET, SUITE 600 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/25/2014 | | | | | | | | - | | r (give title belo | ow) | | specify belo | ow) | |
| (Street) CHICAGO, IL 60607 | | | | 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 | | | | | | | |
| (City) |) | (State) | | (Zip) | Table I - Non-Derivative Securities Acqui | | | | | | | quir | ired, Disposed of, or Beneficially Owned | | | | | | | |
| (Instr. 3) Date | | ansaction nth/Day/Year) | Exec any | A. Deemed secution Date, if y Month/Day/Year) | | Code (Instr. 8) | | | 4. Securities Acqu (A) or Disposed of (D) (Instr. 3, 4 and 5) | | of |] | 5. Amount of Securiti Beneficially Owned F Reported Transaction (Instr. 3 and 4) | | Following | Form Direc | ership or n: B et (D) O | Nature f Indirect eneficial wnership nstr. 4) | | |
| | | | | | | | | Co | ode | V | Amour | Amount (A) or (D) | | ice | | | | (I) (Instr | | (msu. 4) |
| Common \$0.01 | Stock, par | value | 11/2 | 25/2014 | | | | , | P | | 250 | A | \$ 4.9 | 93 | 250 |) | | | | |
| Common Stock, par value \$0.01 11/26/2014 | | | 26/2014 | | | | | P | 150 A \$ 5 400 | | | | | D | | | | | | |
| Reminder: indirectly. | Report on a | separate line | for eac | h class of secu | rities | beneficial | ly o | wned | F | ers | ons wh | | | | | ection of in | | | SEC | C 1474 (9- 02) |
| | | | | | | | | | t | he fo | orm di | splays a | cu | ırreı | ntly valid | d OMB cor | ntrol numb | er. | | |
| | | | | Table II - D | | | | | | | | | | | ly Owned | I | | | | |
| Security | vative Conversion Date Conversion of Exercise (Month/Day/Year) Execution Date, if Transaction of Code Derivat | | mber rative rities ired rosed) . 3, | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Tit Amo Unde Secu | tle and bunt of erlying trities r. 3 and | (Instr. 5) | | y D Se D or n(s) (I | ownership orm of perivative ecurity: pirect (D) r Indirect | Beneficia Ownersh (Instr. 4) | | | | | | | |
| | | | | | | Code | V | (A) | (D) | Date Exer | cisable | Expiration Date | on , | Title | or Number of Shares | | | | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Marovitz Daniel C/O PROFESSIONAL DIVERSITY NETWORK, INC. 801 W. ADAMS STREET, SUITE 600 CHICAGO, IL 60607 | X | | | | | | |

Signatures

| /s/ David Mecklenburger, attorney-in-fact | 11/26/2014 |
|---|------------|
| **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).

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.