FORM 4

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

OMB APPROVAL						
OMB Number: 3235-028						
Estimated average burden nours per response 0.5						
ours 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

(Print or Ty	pe Response	3)														
1. Name and Address of Reporting Person * Kirsch James R			2. Issuer Name and Ticker or Trading Symbol Professional Diversity Network, Inc. [IPDN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 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) 12/08/2014							X_ DirectorX 10% Owner X_ Officer (give title below) Other (specify below) Chief Executive Officer						
(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)								
CHICAGO, IL 60607								_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City) (State) (Zip)			Table I - Non-Derivative Securities Acquir						red, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		Execution Date, if Code				4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			of	d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
							Code	V	Amour	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock, par	value \$0.01	12/08/2014				P		500	A	\$ 4.9	1,060,96	56		D	
Common	Stock, par	value \$0.01										1,000			I	By daughter (1)
Common	Stock, par	value \$0.01										1,000			I	By son (2)
Common	Stock, par	value \$0.01										1,000			I	By daughter (3)
Reminder: I	Report on a	separate line fo	or each class of secu	rities be	eneficiall	ly ow	vned direc	tly or								
								conta	ained i	n this fo	rm are	e not req	ction of in uired to re d OMB cor	spond un	less	EC 1474 (9- 02)
			Table II - D									ly Owned	l			
Derivative Security (Instr. 3)	Title of 2. 3. Transaction 3A. Deemed Execution Date (Month/Day/Year) any		te, if 4.	ransactio	5. On of D Sci A (A D	5. Number of		nd Expiration Date Month/Day/Year)		7. T Amo Und Secu (Inst	Amount or Number	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form o Derivat Security Direct (or Indir	Ownership (Instr. 4) Ownership	
				(Code	V ((D)	Exer	cisable	Date		of Shares				

Reporting Owners

Power Common Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Kirsch James R C/O PROFESSIONAL DIVERSITY NETWORK, INC. 801 W. ADAMS STREET, SUITE 600 CHICAGO, IL 60607	X	X	Chief Executive Officer				

Signatures

/s/ David Mecklenburger, Attorney-In-Fact	12/09/2014	
**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).
- (1) These shares are held by the reporting person's daughter who shares the same household as the reporting person.
- (2) The reporting person has investment power over these securities which are held in an account for the reporting person's son.
- (3) The reporting person has investment power over these securities which are held in an account for the reporting person's daughter.

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.