FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-02										
II –											

37 Estimated average burden hours per response: 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

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1. Name and Address of Reporting Person* Mullennix Stephen						2. Issuer Name and Ticker or Trading Symbol <u>UroGen Pharma Ltd.</u> [URGN]										neck all ap			g Per	son(s) to Iss		
																v Offi	cer (g	give title		Other (· I	
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)										A belo	,	ef Oner	ating	below) Officer		
C/O UROGEN PHARMA LTD.					05/	05/14/2019											Cili	ст Орск	8	Giffeei		
499 PARK AVENUE																						
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)					
NEW YORK NY 10022															Form filed by One Reporting Person							
CITY																Form filed by More than On Person				n One Repo	orting	
(City)	(S	tate) ((Zip)																			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)					ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)			rities Acquired (A) ed Of (D) (Instr. 3, 4			Secu Bene Own	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Co	de V	Ì	Amount		A) or D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Ordinary Shares 05/14/2							2019			I	Ì	1,759		A (1)		5,989		39		D		
Ordinary Shares 05/14/2					1/2019	2019			S			608 ⁽²	D \$3		\$37.9	98 5,381		31	D			
		Т	able II -									sed of, onverti				Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea				7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		Security	8. Price of Derivative Security (Instr. 5)	e d	Number lerivative Securities Beneficially Dwned Following Reported Transaction Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	Code	v	(A)	(D)	Date Exerci	sable		kpiration ate	Title		Amount or Number of Shares							
Restricted Stock Units	(1)	05/14/2019			M			1,759	(3)		(3)	Ordin Shar		1,759	\$0.00		12,314		D		

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one ordinary share of the Issuer.
- 2. Represents shares sold to satisfy withholding tax obligations upon the settlement of restricted stock units.
- 3. The reporting person was granted restricted stock units ("RSUs") on March 7, 2018, June 4, 2018 and October 28, 2018 representing 21,107 ordinary shares in the aggregate. 1/3rd of the RSUs vested on February 14, 2019, with the balance vesting in equal quarterly installments thereafter over a period of two years.

Remarks:

/s/ Charles J. Bair, Attorney-in-05/16/2019 **Fact**

** 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.