FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington,	D.C.	20549
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theck this box if no longer subject to
ection 16. Form 4 or Form 5
bligations may continue. See
actruption 1(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

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*  Barrett Elizabeth A.  (Last) (First) (Middle)  C/O UROGEN PHARMA LTD.					2. Issuer Name and Ticker or Trading Symbol UroGen Pharma Ltd. [ URGN ]									neck all app Direc	ationship of Reportin c all applicable) Director		10% Ov	vner	
						3. Date of Earliest Transaction (Month/Day/Year) 01/03/2021									er (give title v) Chief Exec	cutive	Other (s below) • Officer	pecify	
400 ALE	4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable								
(Street)	TON N	T.	00540										Lin	,	filed by On	e Rep	orting Perso	n	
PRINCE	TON N	J	08540		-									Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
		Tab	le I - N	on-Deriv	ative/	Sec	uriti	ies Ac	quire	d, Di	isposed (	of, or Be	neficia	lly Owne	ed				
1. Title of Security (Instr. 3)		2. Transac Date (Month/Da		Exe /Year) if ar		2A. Deemed Execution Date, if any (Month/Day/Year)		ction Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Securi Benefi Owner	5. Amount of Securities Beneficially Owned Following		n: Direct or Indirect nstr. 4)	Ownership			
								Code V Amo		Amount	(A) or (D) Price		Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Ordinary Shares			01/03/2	2021				M		8,807	A	(1)	23	37,924		D			
Ordinary Shares			01/31/2	/2021				M		5,000	A	(1)	24	242,924		D			
Ordinary Shares			05/19/2	05/19/2021				F		2,185(2)	D	\$17.50	89 24	240,739		D			
Ordinary Shares 05/			05/19/2	:021				F		1,240(2)	D	\$17.50	89 23	9,499		D			
		Т	able II								posed of converti			y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		if any	emed ion Date, /Day/Year)	4. Transa Code ( 8)				6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares						
Restricted Stock Units	(1)	01/03/2021			M			8,807	(3)		(3)	Ordinary Shares	8,807	\$0.00	105,68	39	D		
Restricted Stock	(1)	01/31/2021			M			5,000	(4)		(4)	Ordinary Shares	5,000	\$0.00	10,000	0	D		

## **Explanation of Responses:**

- $1. \ Each \ restricted \ stock \ unit \ ("RSU") \ represents \ a \ contingent \ right \ to \ receive \ one \ ordinary \ share \ of \ the \ Issuer.$
- 2. Represents shares sold to satisfy withholding tax obligations upon the settlement of RSUs.
- 3. The reporting person was granted RSUs on January 3, 2019 representing 317,065 ordinary shares. 33.33% of the RSUs vested on January 3, 2020. 33.33% of the RSUs vested in equal monthly installments through January 3, 2021. The remaining 33.33% of the RSUs will vest on January 3, 2022.
- 4. The reporting person was granted RSUs on January 31, 2020 representing 15,000 ordinary shares. The RSUs will vest in three equal annual installments from January 31, 2021.

## Remarks:

/s/ Jason Smith, Attorney-in-Fact

05/20/2021

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.