## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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

## ENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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*  ZANIBONI STEVE					2. Issuer Name <b>and</b> Ticker or Trading Symbol Trovagene, Inc. [ TROV ]									Check a	all app	p of Reportir blicable) ctor er (give title	ng Pers	10% C			
(Last) (First) (Middle) C/O TROVAGENE, INC.						3. Date of Earliest Transaction (Month/Day/Year) 06/09/2014									X	below)		CFO	below)		
11055 FLINTKOTE, SUITE B					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) SAN DIE	EGO CA	A 9	92121												X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (	Zip)																		
		Tabl	e I - Noi	า-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	of, o	r Ben	efici	ally C	Owne	ed				
1. Title of Security (Instr. 3)  2. Transar Date (Month/Da					Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (ADisposed Of (D) (Instr. 35)					nd S	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount		(A) or (D)	Price	, l	Reported Transaction(s) (Instr. 3 and 4)				(111511.4)	
Common Stock 06/09					9/2014	-			P		6,329	9	A	\$3.	.95	6,329			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	ive Conversion Date Execution Date, Trans y or Exercise (Month/Day/Year) if any Code			Transa Code (	nsaction of			Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V		(A)	(D)	Date Exercisa	Date E		Title	of	nber							

**Explanation of Responses:** 

/s/ Stephen Zaniboni

06/10/2014

\*\* 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.