FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

1. Name and Addre		0	2. Issuer Name and Ticker or Trading Symbol <u>Trovagene, Inc.</u> [TROV]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BRIDGER M	IANAGE.	<u>VIENI, LLC</u>	<u></u> [Director X 10% Owner					
(Last) 90 PARK AVEN 40TH FLOOR	(First) NUE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/25/2015	Officer (give title Other (specify below)					
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable					
(Street) NEW YORK	NY	10016	_	Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
(City)	(State)	(Zip)							
		Table I - Non-Der	ivative Securities Acquired, Disposed of, or Bene	ficially Owned					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction					5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(msu: 4)
Common Stock, \$.0001 par value per share	02/25/2015		Р		105,142	A	\$5.12 ⁽¹⁾	2,692,443	I ⁽²⁾⁽³⁾	See footnotes ⁽²⁾⁽³⁾
Common Stock, \$.0001 par value per share	02/26/2015		Р		78,801	A	\$5.42 ⁽⁴⁾	2,771,244	I(2)(3)	See footnotes ⁽²⁾⁽³⁾
Common Stock, \$.0001 par value per share	02/27/2015		Р		79,343	A	\$5.62 ⁽⁵⁾	2,850,587	I (2)(3)	See footnotes ⁽²⁾⁽³⁾

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		e Amount of		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

1. Name and Address of Reporting Person* BRIDGER MANAGEMENT, LLC

(Last)	(First)	(Middle)	
90 PARK AVEN	UE		
40TH FLOOR			
(Street)			
NEW YORK	NY	10016	
(City)	(State)	(Zip)	
MIGNONE R	s of Reporting Perso		
(Last)	(First)	(Middle)	
90 PARK AVEN	UE		
40TH FLOOR			
(Street)			
NEW YORK	NY	10016	
		10010	

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price, rounded to the nearest whole cent. These Shares (as defined below) were purchased in multiple transactions at prices ranging from \$4.84 to \$5.20, inclusive. The Reporting Persons undertake to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, full information regarding the number of Shares purchased at each separate price within the ranges set forth in footnote (1) to this Form 4.

2. The shares of Common Stock, \$.0001 par value per share (the "Shares") reported herein as indirectly beneficially owned by the Reporting Persons are held of record by Swiftcurrent Partners, L.P., Swiftcurrent Offshore Master Ltd. and Bridger Healthcare Ltd. Bridger Management, LLC is the investment adviser to Swiftcurrent Partners L.P., Swiftcurrent Offshore Master Ltd., and Bridger Healthcare Ltd., and Bridger Healthcare Ltd., and Bridger Healthcare Science Scien

3. Each reporting person and entity named herein disclaims beneficial ownership of the reported securities except to the extent of his or its pecuniary interest therein and this report shall not be deemed an admission that the reporting person or any entity named herein is the beneficial owner of the securities for purposes of Section 16, or for any other purpose.

4. The price reported in Column 4 is a weighted average price, rounded to the nearest whole cent. These Shares were purchased in multiple transactions at prices ranging from \$5.25 to \$5.50, inclusive. The Reporting Persons undertake to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, full information regarding the number of Shares purchased at each separate price within the ranges set forth in footnote (4) to this Form 4.

5. The price reported in Column 4 is a weighted average price, rounded to the nearest whole cent. These Shares were purchased in multiple transactions at prices ranging from \$5.50 to \$5.65, inclusive. The Reporting Persons undertake to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, full information regarding the number of Shares purchased at each separate price within the ranges set forth in footnote (5) to this Form 4.

Remarks:

 /s/ Roberto Mignone,

 Managing Member of Bridger
 02/27/2015

 Management, LLC

 /s/ Roberto Mignone,

 Individually

 ** 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.