FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287
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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

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

Name and Address of Reporting Person* Setteman Dever					2. Issuer Name and Ticker or Trading Symbol XpresSpa Group, Inc. [XSPA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Satzman Doug				Ι.	<u> </u>								X	Director		10% Owner		ner	
(Last) (First) (Middle)				[Officer (g below)	ive title	Other (specify below)		ecify	
					3. Date of Earliest Transaction (Month/Day/Year)									Chief Executive Officer					
C/O XPRESSPA GROUP, INC.				- [02/11/2019									James Zaceau ve Sances					
780 THI	RD AVENU	JE, 12TH FLOC)R																
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	6. Individual or Joint/Group Filing (Check Applicable Line)					
NEW Y	ORK N	ΙΥ	10017										X	X Form filed by One Reporting Person					
														Form filed by More than One Reporting Pers					
(City)	(5	State)	(Zip)																
		T	able I - Non	-Deriva	tive S	Securitie	s Ac	quired,	Dis	posed o	of, or E	Bene	ficially	Owned					
Date				2. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Dispose Code (Instr.			rities Acquired (A) o ed Of (D) (Instr. 3, 4 a			5. Amount Securities Beneficiall Owned Fo	y	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(4	A) or D)	Price	Reported Transactio (Instr. 3 an			(1	Instr. 4)	
Common Stock 02/1				02/11/2	1/2019			A		750,00	00(1)	A	\$0	750,	000		D		
			Table II - [wned			•		
			(e.g., pu	ıts, ca	lls, warr	ants	, optior	ıs, c	onverti	ble se	curit	ies)						
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	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transact	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisab		xpiration ate	Title	Nu	nount or imber of ares		(Instr. 4)	ion(s)			
Stock Option (Right to	\$0.21	02/11/2019		A		1,500,000		(2)	0.	2/11/2029	Commo Stock	n 1,	500,000	\$0.00	1,500,	000	D		

Explanation of Responses:

- 1. Represents 750,000 shares of restricted stock which vest in in full and become non-forfeitable on February 10, 2020, subject to the Reporting Person's continued service through the applicable vesting date.
- 2. The shares underlying this option vest in substantially equal installments on each of the first four anniversaries of the grant date, such that the options will be fully vested as of February 11, 2023, subject to the Reporting Person's continued service through the applicable vesting date.

/s/ Douglas Satzman 02/13/2019

** Signature of Reporting Person

Date

 $\label{lem:Reminder:Report on a separate line for each class of securities beneficially owned directly or indirectly.$

- * 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.