Trovagene, Inc. Form 3 August 09, 2013

# FORM 3

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

**OMB** Number:

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*

Statement

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

À BRIDGER MANAGEMENT,

(Month/Day/Year)

Trovagene, Inc. [TROV]

LLC

07/30/2013

(Last) (First) (Middle) 4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

90 PARK AVENUE, 40TH

(Street)

**FLOOR** 

(Check all applicable)

6. Individual or Joint/Group

\_\_X\_\_ 10% Owner Director Officer Other (give title below) (specify below)

Filing(Check Applicable Line) Form filed by One Reporting

Person

\_X\_ Form filed by More than One

Reporting Person

NEW YORK. NYÂ 10016

(City) (State) (Zip)

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned

Ownership

3.

4. Nature of Indirect Beneficial Ownership

(Instr. 4)

Form: Direct (D) or Indirect (Instr. 5)

(I) (Instr. 5)

Common Stock, \$0.0001 par value per share 2,142,857  $I^{(1)}(2)$ 

See footnotes (1) (2)

Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

4.

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

**Expiration Date** (Month/Day/Year)

2. Date Exercisable and 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

5. Ownership Conversion or Exercise Form of

6. Nature of Indirect Beneficial Ownership

(Instr. 5)

Price of Derivative Derivative Security:

#### Edgar Filing: Trovagene, Inc. - Form 3

Date Expiration Title Amount or Security Direct (D)

Exercisable Date Number of or Indirect
Shares (I)

(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address	Relationships			
<b>-</b>	Director	10% Owner	Officer	Other
BRIDGER MANAGEMENT, LLC 90 PARK AVENUE 40TH FLOOR NEW YORK, NY 10016	Â	ÂX	Â	Â
MIGNONE ROBERTO 90 PARK AVENUE 40TH FLOOR NEW YORK, NY 10016	Â	ÂX	Â	Â

# **Signatures**

/s/ Roberto Mignone, Managing Member of Bridger Management,
LLC

\*\*Signature of Reporting Person

Date

/s/ Roberto Mignone, Individually

\*\*Signature of Reporting Person

Date

Date

#### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- The shares of Common Stock, \$0.0001 par value per share (the "Shares"), reported herein as being beneficially owned by the Reporting

  Owners are held of record by Swiftcurrent Partners L.P. and Swiftcurrent Offshore Ltd. Bridger Management LLC is the investment adviser to Swiftcurrent Partners L.P. and Swiftcurrent Offshore Ltd. and, as such, may be deemed to share beneficial ownership of the Shares. Roberto Mignone is the managing member of Bridger Management, LLC.
- Each reporting person and entity named herein disclaims beneficial ownership of the reported securities except to the extent of his or its (2) 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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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