FORM 4

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

OMB APPR	OVAL					
OMB Number:	3235-0287					
Estimated average burden						
hours per response	e 0.5					

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 OF SECURITIES

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

(Print or Ty	pe Response	es)														
Name and Address of Reporting Person * Avgerinos George					2. Issuer Name and Ticker or Trading Symbol Fortress Biotech, Inc. [FBIO]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O FORTRESS BIOTECH, INC., 2 GANSEVOORT STREET, 9TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 09/15/2016						X Officer (give title below) Other (specify below) SVP, Biologics Operations						
<u> </u>				4.	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City))	(State)	(Zip)		Ta	ble I - No	n-Der	ivative S	ecuritie	s Acqui	red, Disp	osed of, or	Beneficially	Owned		
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/	Year) Exc	. Deemed ecution Date, i	(Instr. 8)		(A) or 1		of (D)	Beneficia Reported	Amount of Securities afficially Owned Following orted Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				(IVI	ontii/Day/Tea	Code	V	Amoun	(A) or at (D)	Price	or (I)			(Instr. 4)		
Common \$0.001	Stock, par	value	09/15/2016			S		15,000		\$ 2.54 (1)	293,000			D		
Common \$0.001	Stock, par	value	09/16/2016	;		S		33,912	2 D	\$ 2.55 259,088				D		
			Table		vative Securio	-	the red, D	tained i form dis	n this fo splays a of, or Be	orm are a curre	e not req ently valid	uired to re d OMB co	nformation espond un ntrol numb	less	EC 1474 (9- 02)	
Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day)	Year) Execut	emed ion Date, i	4. Transaction Code r) (Instr. 8)	5. Numb	er 6. Date Exercisable and Expiration Date (Month/Day/Year) s i			7. T Ame Und Seco	Γitle and 8. Price of		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Ownersh (Instr. 4) O)	
					Code V	(A) (D		e ercisable	Expirati Date	ion Title	Amount or Number of Shares					
Repor	ting O	wners														
D		No. 1	44			Relation	nships									
Reporting Owner Name / Address Dire			Director	10% Owner	Officer Oth				Other	r						
Avgerinos George C/O FORTRESS BIOTECH, INC. 2 GANSEVOORT STREET, 9TH FLOOR NEW YORK, NY 10014					SVP, I	Biolog	gics Ope	erations	3							

Signatures

/s/ S. Halle Vakani, Attorney-in-Fact	09/19/2016			
**Signature of Reporting Person	Date			

Explanation of Responses:

- * 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).

- This transaction was executed in multiple trades ranging from \$2.49 to \$2.58. The price reported in Column 4 is a weighted average price. The reporting person hereby (1) undertakes to provide upon request to the SEC staff, the Issuer or a security holder of the Issuer full information regarding the number of shares and prices at which the transactions were effected.
- This transaction was executed in multiple trades ranging from \$2.53 to \$2.62. The price reported in Column 4 is a weighted average price. The reporting person hereby (2) undertakes to provide upon request to the SEC staff, the Issuer or a security holder of the Issuer full information regarding the number of shares and prices at which the transactions were affected.

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.