

Professional Diversity Network, Inc.
 Form 3
 July 11, 2016

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2015
 Estimated average burden hours per response... 0.5

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 *			2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â White Winston Select Asset Funds, LLC (Last) (First) (Middle)			(Month/Day/Year)	Professional Diversity Network, Inc. [IPDN]	
265 FRANKLIN ST., SUITE 1702,Â			06/30/2016	4. Relationship of Reporting Person(s) to Issuer	
(Street)				(Check all applicable)	
BOSTON,Â MAÂ 02110				<input type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below)	
(City) (State) (Zip)				5. If Amendment, Date Original Filed(Month/Day/Year)	
				6. Individual or Joint/Group Filing(Check Applicable Line) <input type="checkbox"/> Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
------------------------------------	----------------------------------------------------------	-------------------------------------------------------------------	----------------------------------------------------------

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable Expiration Date	Title Amount or Number of			

Edgar Filing: Professional Diversity Network, Inc. - Form 3

				Shares		or Indirect (I) (Instr. 5)	
Common Stock Purchase Warrant	12/30/2016	12/30/2021	Common Stock, par value \$0.01 per share	1,000,000	\$ 2.5	D	Â
Common Stock Purchase Warrant	06/30/2016	06/30/2021	Common Stock, par value \$0.01 per share	1,750,000	\$ 0.25	D	Â
Common Stock Purchase Warrant	06/30/2016	06/30/2021	Common Stock, par value \$0.01 per share	1,000,000	\$ 0.25	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
White Winston Select Asset Funds, LLC 265 FRANKLIN ST., SUITE 1702 BOSTON, MA 02110	Â	Â X	Â	Â
Enright Todd M. C/O WHITE WINSTON SELECT ASSET FUNDS LLC 265 FRANKLIN ST., SUITE 1702 BOSTON, MA 02110	Â	Â X	Â	Â
BLUNDELL MARK C/O WHITE WINSTON SELECT ASSET FUNDS LLC 265 FRANKLIN ST., SUITE 1702 BOSTON, MA 02110	Â	Â X	Â	Â
Feagan Donald C/O WHITE WINSTON SELECT ASSET FUNDS LLC 265 FRANKLIN ST., SUITE 1702 BOSTON, MA 02110	Â	Â X	Â	Â

Signatures

White Winston Select Asset Funds, LLC, By: /s/ Todd M. Enright, Todd M. Enright,
Manager

07/11/2016

**Signature of Reporting Person

Date

/s/ Todd M. Enright

07/11/2016

**Signature of Reporting Person

Date

Edgar Filing: Professional Diversity Network, Inc. - Form 3

/s/ Mark Blundell

07/11/2016

__Signature of Reporting Person

Date

/s/ Donald Feagan

07/11/2016

__Signature of Reporting Person

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).

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.