

OMB APPROVAL	
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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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * Giffoni Kim <hr/> (Last) (First) (Middle) TARGETED MEDICAL PHARMA, INC., 2980 BEVERLY GLEN CIRCLE, SUITE 301 <hr/> (Street) LOS ANGELES CA 90077 <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol Targeted Medical Pharma, Inc. [TRGM]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) EVP Foreign Sales/Inv. Rel.
	3. Date of Earliest Transaction (Month/Day/Year) 08/19/2013	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

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)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock	08/19/2013		G		638,188	D	\$ 0	2,654,548	I	By trust ⁽¹⁾ ₍₂₎

**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. Transaction Code (Instr. 8)		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 Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: 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 *
[Giffoni Kim](#)

(Last) (First) (Middle)
[TARGETED MEDICAL PHARMA, INC., 2980 BEVERLY GLEN CIRCLE, SUITE 301](#)

(Street)
[LOS ANGELES CA 90077](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person *
[Giffoni Family Trust Dated September 26 2008](#)

(Last) (First) (Middle)
[245 PARADISE COVE ROAD](#)

(Street)
[MALIBU CA 90265](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person *
[Giffoni Olena B.](#)

(Last) (First) (Middle)
[245 PARADISE COVE ROAD, C/O GIFFONI FAMILY TRUST](#)

(Street)
[MALIBU CA 90265](#)

(City) (State) (Zip)

Explanation of Responses:

- This Form 4 is filed jointly by Kim Giffoni, Olena B. Giffoni and the Giffoni Family Trust Dated September 26, 2008 ("Giffoni Family Trust"). The Giffoni Family Trust is a 10% owner of the Company and Mr. Giffoni and Ms. Giffoni may be deemed to be 10% owners of the Company. Mr. Giffoni is the Executive Vice President of Foreign Sales and Investor Relations and a director of the Company.
- These securities are owned indirectly by Mr. Giffoni and Ms. Giffoni by virtue of their being co-Trustees of the Giffoni Family Trust. Mr. Giffoni and Ms. Giffoni share voting and dispositive control with respect to the securities owned by the Giffoni Family Trust. Mr. Giffoni and Ms. Giffoni disclaim beneficial ownership of any shares owned by the Giffoni Family Trust except to the extent of their pecuniary interest therein.

[Giffoni Family Trust dated September 26, 2008, by /s/ 09/17/2013](#)
[Kim Giffoni, Co-Trustee](#)
[/s/ Kim Giffoni](#) [09/17/2013](#)
[/s/ Olena B. Giffoni](#) [09/17/2013](#)

** 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.