TechTarget Inc Form 3 February 18, 2015

FORM 3

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

OMB Number:

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Expires: January 31,

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SECURITIES

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

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 * Levenson Bruce	Date of Event Requiring Statement (Month/Day/Year)	2. 155401 1 (4111	e and Ticker of the transfer	or Trading Symbol
(Last) (First) (Middle)	02/10/2015	4. Relationshi Person(s) to Is	p of Reporting	5. If Amendment, Date Original Filed(Month/Day/Year)
C/O 275 GROVE ST. (Street) NEWTON, MA 02466		(Check _X_ Director Officer (give title below	Othe	Owner Ow
(City) (State) (Zip)	Table I - I	Non-Derivat	ive Securit	ies Beneficially Owned
1.Title of Security (Instr. 4)	2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	379,699		D	Â
Common Stock	1,079,182		I	Levenson Family Irrevocable Trust GST
Common Stock	462,687		I	Levenson Family Irrevocable Trust Non GST
Reminder: Report on a separate line for owned directly or indirectly.	r each class of securities benefic	cially SI	EC 1473 (7-02	2)
	espond to the collection of ntained in this form are no			

currently valid OMB control number.

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 $Table\ II\ -\ Derivative\ Securities\ Beneficially\ Owned\ (\textit{e.g.},\ puts,\ calls,\ warrants,\ options,\ convertible\ securities)$

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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)

Conversion or Exercise Price of Derivative Security

5. Ownership Form of Derivative Security:

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Date Exercisable

Expiration Title Date

Amount or Number of Shares

or Indirect (I) (Instr. 5)

Direct (D)

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Levenson Bruce

C/O 275 GROVE ST. NEWTON, MAÂ 02466 ÂX Â Â

Signatures

Jane Freedman Attorney in Fact

02/18/2015

**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.

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