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

| OMB APPROVAL | | | | | |
|-------------------------|-----------|--|--|--|--|
| MB Number: | 3235-0287 | | | | |
| stimated average burden | | | | | |
| ours per response | 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 Typ | e Responses |) | | | | | | | | | | | | | | |
|--|-------------|------------|----------------------------------|---|-------------|--|--|---|------------------------------------|-----------------------------------|---|--------------------------------------|--|---|-----------------|--|
| 1. Name and Address of Reporting Person * LIEBERMAN DAVID PHILIP | | | | 2. Issuer Name and Ticker or Trading Symbol Marathon Patent Group, Inc. [MARA] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
| (Last) (First) (Middle) C/O MARATHON PATENT GROUP, INC., 1180 N. TOWNE CENTER DRIVE, SUITE 100 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/12/2018 | | | | | | | X Officer (give title below) Other (specify below) Chief Financial Officer | | | | | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | _X_ F | 6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| LAS VEGAS,, NV 89144 (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acqui | | | | | | auired. | ired, Disposed of, or Beneficially Owned | | | | | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea | | | 2A. Deemed Execution Date, if | | rate, if Co | 3. Transaction Code (Instr. 8) | | 4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5) (A) or Amount (D) Pr | | I 5. Ar Own Trans (Instr | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | 5. 7 Ownership Corm: Form: | Beneficial Ownership | | |
| 1. Title of 2. 3. Transaction 3A. Deemed | | | | (e.g., puts, calls, wa 4. 5. Nu Transaction Deriv Code Secur r) (Instr. 8) Acqu | | 5. Number Derivative Securities Acquired or Dispos | contai form of ies Acquired, Disp arrants, options, c umber of 6. Date 1 Expiratio (Month/I isposed | | on Date of Uno Day/Year) Securi | | re not r y valid illy Owi | required to OMB corned 1 Amount ing | 8. Price of Derivative Security (Instr. 5) | unless the er. 9. Number of | 10. Ownershi | 11. Nature p of Indirect Beneficial Ownership (Instr. 4) |
| | 5000000 | | | | | (Instr. 3, and 5) | | Date Exercisab | Expiration Date | Titl | le | Amount or Number | | Reported Transaction(s (Instr. 4) | or Indirec | |
| Employee Stock Option (right to buy) | \$ 0.58 | 10/12/2018 | | A | V | (A) 200,000 | (D) | (1) | 10/12/20 | 28 Co: | mmon | 200,000 | \$ 0 | 200,000 | D | |
| Repor | ting O | wners | | | | | | | | | | | | | | |

| Reporting Owner Name / Address | | Relationships | | | | | | |
|--|---|---------------|-------------------------|-------|--|--|--|--|
| | | 10% Owner | Officer | Other | | | | |
| LIEBERMAN DAVID PHILIP C/O MARATHON PATENT GROUP, INC. 1180 N. TOWNE CENTER DRIVE, SUITE 100 LAS VEGAS,, NV 89144 | X | | Chief Financial Officer | | | | | |

Signatures

| /s/ David Lieberman | 10/16/2018 |
|---------------------------------|------------|
| **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).
- (1) Vesting fifty (50%) percent on the date of grant and twenty-five (25%) percent following on each six (6) months anniversary of the date of grant provided awardee is still eligible under the Compay's 2018 Equity Incentive Plan subject to acceleration following a change of control.

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.