FORM 4

may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations

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

OMB APPROVAL							
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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 * Richman Michael				2. Issuer Name and Ticker or Trading Symbol PIERIS PHARMACEUTICALS, INC. [PIRS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O PIERIS PHARMACEUTICALS, INC., 255 STATE STREET, 9TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 07/25/2018								ve title below)		(specify below)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)							_X_1	6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person iired, Disposed of, or Beneficially Owned					
BOSTON, MA 02109 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						Acquired,						
1.Title of S (Instr. 3)	ecurity		Date (Month/Day/Year)	2A. Deer Executio any (Month/I	n Date,	(In	Fransac de str. 8)	(A	Securition A) or Disposit 3, 4	posed o	of (D) Own Tran		ving Report	Fo D on (I	wnership of orm: Be irect (D) Ov Indirect (Ir	eneficial wnership
			1	e.g., puts	calls, v	varra	cquire	d, Dispo	sed of, o	or Bene e secur	eficially Ov	vned	ontrol num			
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, i	4. Transaction Code ar) (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4,					7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V (A	A) (1		e rcisable	Expira Date	tion	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$ 5.92	07/25/2018		A	2,8			25/2018	8 07/25	/2028	Common Stock		\$ 3.86 (1)	2,837	D	

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Namess	Director	10% Owner	Officer	Other			
Richman Michael C/O PIERIS PHARMACEUTICALS, INC. 255 STATE STREET, 9TH FLOOR BOSTON, MA 02109	X						

Signatures

/s/ Marc D. Mantell, Attorney-in-fact	07/26/2018			
**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) The stock option was issued to the Reporting Person, who elected to take stock options in lieu of \$10,937.50 in cash compensation for services as a director and committee member, pursuant to the Issuer's non-employee director compensation policy.

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.