FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287							
Estimated average burden								
hours 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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	ense conditions of Rule Instruction 10.						
1. Name and Add Martini Jeft	ress of Reporting Per	son*	2. Issuer Name and Ticker or Trading Symbol PALVELLA THERAPEUTICS, INC. [PVLA]		ationship of Reporting Pers all applicable) Director	son(s) to Issuer	
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/05/2025	X	Officer (give title below) Chief Scientit	Other (specify below)	
	LA THERAPEUT	<i>'</i>			Chief Scientific Officer		
125 STRAFFORD AVENUE, SUITE 360			4. If Amendment, Date of Original Filed (Month/Day/Year) 02/07/2025	6. Indiv	vidual or Joint/Group Filing Form filed by One Rep		
(Street)					Form filed by More tha	n One Reporting Person	
WAYNE	PA	19087				, -	
(City)	(State)	(Zip)					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, Transactio					5. Amount of Securities Beneficially Owned Following Reported	 Beneficial Ownership
		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)

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. Transac Code (In 8)		Derivative				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Incentive Stock Option (right to buy)	\$14.76	02/05/2025		A		5,373		(1)	02/05/2035	Common Stock	5,373	\$0.0	5,373	D	
Non-Qualified Stock Option (right to buy)	\$14.76	02/05/2025		A		123,559		(1)	02/05/2035	Common Stock	123,559	\$0.0	123,559	D	

Explanation of Responses:

1. The stock options will vest in equal monthly tranches over 48 months

Remarks:

This amendment is being filed to reflect a change in the reporting person's name from Palvella Therapeutics, Inc to Jeffrey S. Martini.

By: /s/ Kathleen A. McGowan 02/10/2025 For: Jeffrey S. Martini

** 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.