FORM	4
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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).

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

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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

(1 mil of 1 ype Respons)											
1. Name and Address of 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) C/O PIERIS PHAR STATE STREET, 9		C DIC ALL	3. Date of Earliest Transaction (Month/Day/Year) 07/25/2017					Officer (give title below) Other (specify below)				
(Street) BOSTON, MA 02109			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State) (Zip) Table I - Non-Derivative						ivative S	ecurities	Acqu	ired, Disposed of, or Beneficially Ov	vned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		4. Securi (A) or D (Instr. 3,	isposed of 4 and 5) (A) or	of (D)	Transaction(s) (Instr. 3 and 4)	Ownership Form:	Beneficial Ownership	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4. 5. Number		6. Date Exercisable and		7. Title and		8. Price of	9. Number of	10.	11. Nature		
Derivative	Conversion	Date	Execution Date, if	Transact	saction of Exp		Expiration Da	Expiration Date		Amount of		Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)		Code				Underlying 5		Security	Securities	Form of	Beneficial		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Securit	ies	s				(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acquir	ed			(Instr. 3 and 4)				2	(Instr. 4)
	Security					(A) or					0	Direct (D)			
						Dispos	ed					or Indirect			
						of (D)	, 1				Transaction(s)				
						(Instr. 3 and 5)	5, 4,				(Instr. 4)	(Instr. 4)			
						and 5)			1						
											Amount				
								Date	Expiration		or Number				
								Exercisable	Date		of				
				Code	v	(A)	(D)				Shares				
Stock							. /								
Option	\$ 5.64	07/25/2017		А		3,288		07/25/2017	07/25/2027	Common	3,288	\$ 0	3,288	D	
(right to	φ 5.04	0772572017		11		5,200		0772372017	0112312021	Stock	5,200	ΨΟ	5,200	D	
buy)															

Reporting Owners

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

Signatures

/s/ Marc D. Mantell, Attorney-in-fact	07/27/2017
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).

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.