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

(Print or Type Response	es)											
1. Name and Address of Reporting Person – ADAMS JULIAN			2. Issuer Name an PIERIS PHARM			0.0		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X. Director 10% Owner				
(Last) C/O PIERIS PHAR STATE STREET, 9	TO DIO ACC	3. Date of Earliest Transaction (Month/Day/Year) 01/25/2018							ther (specify belo	ow)		
(Street)			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			
BOSTON, MA 02109												
(City)	(State)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1. Title of Security		2. Transaction	2A. Deemed	3. Transact	tion	4. Securi	ities Acq	uired	5. Amount of Securities Beneficially	6.	7. Nature	
(Instr. 3)		Date	Execution Date, if	Code	Code (A) or Disposed of (D)			of (D)	Owned Following Reported	Ownership	of Indirect	
(Month/Day/Year			any	(Instr. 8)		(Instr. 3, 4 and 5)			Transaction(s)	Form:	Beneficial	
			(Month/Day/Year)					1	(Instr. 3 and 4)		Ownership	
										or Indirect	(Instr. 4)	
				C 1	*7		(A) or	n ·		(I) (I)		
				Code	V	Amount	(D)	Price		(Instr. 4)		

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. Numb	Number 6. Date Exercisable and		rcisable and	7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transac	tion	of		Expiration I	Date	Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivati	ve	(Month/Day	/Year)	Underlying Sec		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securitie	es	s		Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acquire	d			(Instr. 3 and 4)			Owned	Security:	(Instr. 4)
	Security					(A) or							0	Direct (D)	
						Dispose	d of					1	or Indirect		
						(D)						Transaction(s)	· /		
						(Instr. 3,	, 4,					(Instr. 4)	(Instr. 4)		
						and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
				a 1	* *	(• >					of				
				Code	V	(A)	(D)				Shares				
Stock															
Option	¢ 7 70	01/05/2010				20.000			01/05/0000	Common Stock	20.000	.	20.000	D	
(right to	\$ 7.72	01/25/2018		Α		20,000		<u>(1)</u>	01/25/2028	Stock	20,000	\$ 0	20,000	D	
buy)										Stoon					
ouj)															

Reporting Owners

Reporting Owner Name / Address	Relationships							
reporting of the real of real of	Director	10% Owner	Officer	Other				
ADAMS JULIAN C/O PIERIS PHARMACEUTICALS, INC. 255 STATE STREET, 9TH FLOOR BOSTON, MA 02109	х							

Signatures

/s/ Marc D. Mantell, Attorney-in-fact	01/29/2018
**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 will vest in four equal installments on each of March 31, June 30, September 30 and December 31, 2018.

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.