FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							
Estimated average burden								

0.5

hours per response:

Check this box if no longer subje	ect to
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

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 7								
1. Name and Address of Reporting Person* NOYES TIMOTHY P				2. Issuer Name and Ticker or Trading Symbol PROTEON THERAPEUTICS INC [PRTO]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
											Director	r	10%	Owner			
-													(give title		er (specify		
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)							below)	below) below)				
C/O PROTEON THERAPEUTICS				[0.	01/07/2015							President and CEO					
200 WES	ST STREET	Γ															
				4.	If Ame	endment, D	Date o	of Original File	d (Month/Da	ıy/Year)	6. In	dividual or J	oint/Group F	iling (Check	Applicable	\Box	
(Street)						,		Ü	,	,	Line						
WALTH	AM M	IΑ	02451									Form fi	led by One F	Reporting Pe	son		
													led by More	than One Re	porting		
(City)	(\$	tate)	(Zip)									Person					
(City)	(5		(214)														
		Та	ble I - Non-D	Perivati	ve Se	ecurities	s Ac	quired, Di	sposed c	of, or Be	neficially	Owned					
Date			Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.			ed (A) or str. 3, 4 and 5	Beneficia Owned F	es Form ally (D) of following (I) (II	i. Ownership Form: Direct D) or Indirec I) (Instr. 4)	Indirect Beneficia Ownersh	Beneficial Ownership		
								Code V	Amount	(A) o (D)	r Price	Reported Transacti (Instr. 3 a	on(s)		(Instr. 4)	,	
			Table II - De					uired, Dis			•	Owned	,				
					,			, ,					l				
Security or Exercise (Month/Day/Year) if any		Execution Date,	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		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 Transaction(s)	Owner Form: Direct or Indi (I) (Insi	ship of Indi Benefi D) Owner ect (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	1(3)			
Stock Option (Right to Buy)	\$10.61	01/07/2015		A		134,333		(1)	01/06/2025	Common Stock	134,333	\$0	134,333	D			

Explanation of Responses:

1. The shares underlying this option vest 25% on the first anniversary of the grant date and the remaining shares vest in twelve equal quarterly installments.

Remarks:

/s/ George Eldridge, attorney-

01/08/2015

in-fact

** 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.