FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

wasiiiigtoii,	D.C.	20543

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours por rosponso:	0.5						

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. Name and Address of Reporting Person* NOYES TIMOTHY P						2. Issuer Name and Ticker or Trading Symbol PROTEON THERAPEUTICS INC [PRTO])] [5	5. Relationship of Reporting Person(s) to (Check all applicable) X Director 10%				s) to Is		
(Last) (First) (Middle) C/O PROTEON THERAPEUTICS 200 WEST STREET					3. Date of Earliest Transaction (Month/Day/Year) 10/16/2017									X Officer (give title below) President			Other (specify below)				
(Street) WALTHA)2451 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indivi ine) X	Form	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son				
		Tabl	e I - Non	า-Deriv	ative	Sec	uritie	s Acc	quired	l, Dis	sposed o	f, or	Ber	nefici	ally (Owne	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)						Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)			and 5) Secu Bene Own		icially d Following	Form: Di (D) or Inc	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code V		Amount (A) or (D)		Price		Reported Transaction(s) (Instr. 3 and 4)				(1130.4)						
Common Stock 10/16/2									D ⁽¹⁾		10,000		D	\$2.31	312 ⁽²⁾ 38,742		D				
	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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			ansaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of		f g nstr. 3 mount umber	nt		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Direct or Ind (I) (In	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)					

Explanation of Responses:

- 1. The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on August 14, 2017.
- 2. The selling price of \$2.312 is reflective of the weighted average sale price of all transactions reported on this line. The prices for the transactions reported on this line range from \$2.25 to \$2.35. The reporting person undertakes to provide Proteon Therapeutics, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

/s/ George A. Eldridge as attorney-in-fact for Timothy P. 10/17/2017 Noves

** 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.