FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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: Estimated average burden hours per response: 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* <u>Kingsley Stuart A</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol PROTEON THERAPEUTICS INC [PRTO] | | | | | | | of Reporting cable) or | g Pers | on(s) to Issu 10% Ow | | |
|--|---|--|---|-----------------------------------|---|---|-----|--|--------------------|---|--|---|--|--------|--|--|--|
| (Last) | ` | rst) ERAPEUTICS, | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 06/08/2018 | | | | | | | | Officer (give title below) | | | pecify | |
| 200 WEST STREET | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) WALTHAM MA 02451 | | | 02451 | | | | | | | | | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date | | | | Transaction ate Ionth/Day/Y | Execution | | | Code (Ins | | | | Beneficia | es Forn ally (D) o following (I) (Ir | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code V | Amount | (A) or (D) | Price | Transact (Instr. 3 | ion(s) | | | 111501.4) | |
| 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/Ye | Code | | | | 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) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Stock Option (Right to Buy) | \$2.5 | 06/08/2018 | | A | | 12,700 | | (1) | 06/07/2028 | Common Stock | 12,700 | \$0 | 12,700 | 0 | D | | |

Explanation of Responses:

1. The options were granted on June 8, 2018 and the shares underlying this option will vest 100% at the earlier of (i) June 8, 2019 and (ii) the Issuer's next annual meeting of stockholders.

/s/ George A. Eldridge,

06/11/2018 attorney-in-fact for Stuart A.

Kingsley

** 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.