SEC Form 4													
FORM 4	UNITED) STAT	ES S	ECURITIES				E CC	MMIS	SION			1
		Washington, D.C. 20549								OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).		AT OF CHANGES IN BENEFICIAL OWNE d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940							IIP	Estima	Number: ated average burde per response:	3235-0287 en 0.5	
1. Name and Address of Reporting Person [*] <u>RIEDEL NORBERT G</u>				er Name and Ticker Pharmaceutic			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owne						
(Last) (First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/13/2024							Officer (give below)	e title	Other (below)	(specify
C/O ETON PHARMACEUTICALS, INC. 21925 W. FIELD PARKWAY, SUITE 235				endment, Date of ((Month/Day/Ye	6. Indi Line) X	· · · · · · · · · · · · · · · · · · ·						
(Street) DEERPARK IL	08			_				Form filed by More than One Reporting Person					
(City) (State)	(Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										
Та	ble I - Nor	n-Derivat	tive S	ecurities Acqu	uired,	Disp	oosed of, o	r Bene	ficially	Owned			
1. Title of Security (Instr. 3) Date (Month			action 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities / Disposed Of (5)	Acquired D) (Instr.	(A) or 3, 4 and	5. Amount of Securities Beneficially Owned Follov Reported	y	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	Code V Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			(1130. 4)	
	Table II -	Derivativ	/e Sec	curities Acqui	red, D)ispo	sed of, or	Benefi	cially O	wned			

(e.g., puts, calls, warrants, options, convertible securities) 3. Transaction 3A. Deemed 4. 5. Number 6. Date Exercisable and 7. Title and Amount 8. Price of 9. Number of 10.

L															
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/Year)	ate, Transactio Code (Inst				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)	\$4.42	02/13/2024		A		30,000		(1)	02/12/2034	Common Stock	30,000	\$0	164,555	D	

Explanation of Responses:

1. The shares subject to the option shall vest on a quarterly basis over 12 months from the date of grant until fully vested and exercisable on February 13, 2025.

Remarks:

The reporting person has authorized and designated the named person to file this Form 4 on the reporting person's behalf for indefinite duration.

/s/ James R. Gruber

** Signature of Reporting Person

02/15/2024

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.