FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## 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

Name and Address of Reporting Person*     Tattory John A						2. Issuer Name and Ticker or Trading Symbol WINDTREE THERAPEUTICS INC /DE/ [ WINT ]									5. Relationship of Reporting (Check all applicable)  Director  Officer (give title			g Person(s) to Issuer  10% Owner  Other (specify	
(Last) 2600 KE SUITE 10	(Fi LLY ROAL 00			3. Date of Earliest Transaction (Month/Day/Year) 03/15/2019									SVP & CFO						
(Street) WARRINGTON PA 18976  (City) (State) (Zip)					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applic Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person											on		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Trans Date (Month/						ar)	Execution if any	A. Deemed xecution Date, any Month/Day/Year)		3. Transaction Dispose Code (Instr. 8)		ities Acquired (A) d Of (D) (Instr. 3, 4			nd Sec Ber Ow	mount of urities eficially led Following orted	Form:	nership : Direct · Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount	(	A) or D)	Price	, Trai	Transaction(s) (Instr. 3 and 4)			(11341.4)
Common Stock 03/15					5/2019				F		10,28	1	D	\$	0	25,922		D	
Common Stock															713(1)		I	By Trust	
	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. Deemd Execution if any (Month/Da	Date,	Code (Inst		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	O Fo Di OI (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title		nber res					

## **Explanation of Responses:**

1. Holding amount represents issuer's matching stock contribution pursuant to 401(k) plan.

/s/ John A. Tattory

03/19/2019

\*\* Signature of Reporting Person

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.