FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

∥ OMB APP	ROVAL
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## 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

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>Joseph Mahady M</u>						2. Issuer Name and Ticker or Trading Symbol WINDTREE THERAPEUTICS INC /DE/ WINT								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last) 2600 KEI SUITE 10	500 KELLY ROAD					3. Date of Earliest Transaction (Month/Day/Year) 02/13/2017								Officer below)	(give title		Other (s below)	pecify
(Street) WARRINGTON PA 18976  (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Tab	le I - Non-	-Deriva	ative	Sec	curities	Acc	quired, D	isp	osed of	f, or Ber	neficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos		Disposed	ies Acquire Of (D) (Inst		5. Amour Securitie Beneficia Owned F	s ally ollowing	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 Transact (Instr. 3 a	ction(s)		1			
		7	able II - D						ired, Dis					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, T	4. Transaction Code (Instr. 8)		n of		6. Date Exercisable a Expiration Date (Month/Day/Year)			nd 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code V	v	(A)	(D)	Date Exercisable		kpiration ate	Title	Amount or Number of Shares					
Series A Convertible Preferred Stock	\$1.37	02/13/2017			P		17		(1)		(1)	Common Stock	17,000	(2)	17		D	
Series A-1 Warrants (Right to Buy)	\$1.37	02/13/2017			P		17,000		08/15/2017	08	3/15/2024	Common Stock	17,000	(3)	17,00	0	D	

## **Explanation of Responses:**

- 1. Series A Convertible Preferred Stock is immediately exercisable and has no expiration date.
- 2. Series A Convertible Preferred Stock in connection with the purchase of Series A Convertible Preferred Stock units acquired in a private placement offering with a unit price of \$1,495. Each unit consists of one share of Series A Convertible Preferred Stock, which is convertible into 1,000 shares of the Company's common stock, and 1,000 Series A-1 seven-year warrants to purchase one share of the Company's common stock at an exercise price of \$1.37.
- 3. Series A-1 Warrants in connection with the purchase of Series A Convertible Preferred Stock units acquired in a private placement offering with a unit price of \$1,495. Each unit consists of one share of Series A Convertible Preferred Stock, which is convertible into 1,000 shares of the Company's common stock, and 1,000 Series A-1 seven-year warrants to purchase one share of the Company's common stock at an exercise price of \$1.37.

/s/ Mary B. Templeton, Esq., as 02/15/2017 Attorney-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.