FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

	tion 1(b).	iue. See		Filed							es Exchang npany Act o		f 1934			hours	per re	esponse:	0.5
Name and Address of Reporting Person*     Fraser Craig					2. Issuer Name and Ticker or Trading Symbol WINDTREE THERAPEUTICS INC /DE/ [ WINT ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle)						]								X	Officer (give title below)			Other (: below)	specify
2600 KELLY ROAD SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 10/22/2021											Presiden	t and	l CEO	
(Street) WARRINGTON PA 18976						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X	Form Form	lual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (2	Zip)																
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	enefi	cially	/ Own	ed	_		
Date				Date	te onth/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)  4. Securiti Disposed (5)					B, 4 and Secur Bene Owne		cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) (D)	or Pri	ce		action(s) 3 and 4)			(Instr. 4)	
Common	Stock			10/22/	2021				P		3,000	A	. 4	\$1.9 36,298 D			D		
Common	on Stock													1	<b>47</b> <sup>(1)</sup>		I	By Trust	
		Tal									osed of, onvertib				Owne	d			
Security or Exer (Instr. 3) Price of Derivat	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Date Execution   E		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Disp of (D	vative irities ired r osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	,	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Number of Shares	er						

## **Explanation of Responses:**

 $1. \ Holding \ amount \ represents \ is suer's \ matching \ stock \ contribution \ pursuant \ to \ 401(k) \ plan.$ 

/s/ Craig Fraser

10/25/2021

\*\* 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.

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