FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).			File	d nur	suant	to Section	16/2	a) of the Secu	rities Excha	nge Act of	1934		Tiours p	er response.	0.5	
				1 110					Investment C								
1. Name and Address of Reporting Person* Palani Santhosh					2. Issuer Name and Ticker or Trading Symbol Pyxis Oncology, Inc. [PYXS]							Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Parami Santhosn</u>						<u> </u>						X Director 10% Owner			Owner		
(Last)	(F	irst)	(Middle)			Date of 12/2		Trans	saction (Mont	h/Day/Year)		Officer below)	(give title	Other below	(specify		
C/O PYXIS ONCOLOGY, INC.					4 1	4. If Amendment, Date of Original Filed (Month/Day/Year)					6.1	6. Individual or Joint/Group Filing (Check Applicable					
321 HARRISON AVENUE, 11TH FL. SUITE 1				,,,, (Line	e)							
				-								- , , ,					
(Street) BOSTON MA 02118													Form filed by More than One Reporting Person				
	171		02110		R	Rule 10b5-1(c) Transaction Indication						•					
(City)	(S	tate)	(Zip)			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.							led to				
		Tab	ole I - Nor	ı-Deriv	ativ	e Se	curities	s Ac	quired, D	isposed	of, or Be	neficial	ly Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ear)	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Ins	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			Benefici Owned F	es Form ally (D) o Following (I) (Ir	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code V	Amoun	(A) o	r Price	Reporte Transac (Instr. 3	ion(s)		(Instr. 4)	
		-							uired, Dis , options				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) if any ce of ivative (Month/Day		Date, Transaction Code (Instr.		of		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)	Ownersh Form: Direct (D or Indirect (I) (Instr.	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$5.7	03/12/2024			Α		69,760		(1)	03/12/2034	Common Stock	69,760	\$0	69,760	D		

Explanation of Responses:

1. The shares subject to this option shall vest in three equal annual installments beginning on the first anniversary of March 12, 2024, subject to the reporting person's continued service through the applicable vesting date

> /s/ Pamela Connealy, Attorney-03/13/2024 in-Fact for Santhosh Palani

** 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.