FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHII

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* Kobayashi Ken				2. Issuer Name and Ticker or Trading Symbol Pyxis Oncology, Inc. [PYXS]						(Ch	5. Relationship of Reporting Perso (Check all applicable) Director			10% Ow	ner		
(Last)	,	irst) LOGY, INC.	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/29/2023							X Officer (give title Other (specify below) Chief Medical Officer					
321 HARRISON AVENUE				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BOSTO	N M	IA	02118											ed by More		rting Person One Report	
(City)	(S	tate)	(Zip)	F	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.										satisfy							
		Та	ble I - Non-D	Derivati	ve Se	curities	s Ac	quired, l	Disp	osed c	of, or Be	neficiall	/ Owned				
Date			Transaction	Execution Date,		Code (li	Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr.		ed (A) or tr. 3, 4 and	Securities Beneficia Owned Fo	Securities Form		: Direct I · Indirect I str. 4) (7. Nature of ndirect Beneficial Ownership Instr. 4)			
						Code V Amount (A) or (D)		Price	Transacti				msu. 4)				
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. Deemed Execution Date, if any (Month/Day/Yea	Code	ction Derivative		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)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)	on(a)		
Stock Option (Right to Buy)	\$1.8	12/29/2023		A		443,514		(1)	1	2/29/2033	Common Stock	443,514	\$0.00	443,51	14	D	
Stock Option (Right to Buy)	\$1.8	12/29/2023		A		110,878		(2)	1	2/29/2033	Common Stock	110,878	\$0.00	110,87	78	D	

Explanation of Responses:

- 1. The shares subject to this option will vest over four years, with 25% vesting on November 27, 2024 and the remainder vesting in 36 equal monthly installments thereafter, subject to the Reporting Person's continued employment through the applicable vesting dates.
- 2. The shares subject to this option will vest upon the achievement of certain clinical milestones related to data disclosure for PYX-201.

Remarks:

/s/ Pamela Connealy, Attorneyin-Fact for Ken Kobayashi

12/29/2023

** 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.