FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
vvasiliigtoii,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* Hungerford Brian					- <u>Ki</u>	2. Issuer Name and Ticker or Trading Symbol <u>Kiromic Biopharma, Inc.</u> [KRBP] 3. Date of Earliest Transaction (Month/Day/Year)								Relationship of eck all applications Director X Officer below)	cable) or (give title	g Perso	on(s) to Iss 10% Ov Other (s below)	/ner	
(Last) (First) (Middle)					05.	05/03/2024							CFO						
C/O KIROMIC BIOPHARMA INC.				4 1	If Amendment, Date of Original Filed (Month/Day/Year)							6	6. Individual or Joint/Group Filing (Check Applicable						
7707 FANNIN, SUITE 200					"	Transforment, Date of Original Flied (World Day/Teal)								Line)					
(Street)	ON T	X	77054											X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Si	ate)	(Zip)		R			, ,				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.													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				Benefici	s Forn ally (D) o ollowing (I) (Ir		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	mount (A) or (D)		Transact	Transaction(s) (Instr. 3 and 4)			msu. 4)	
Restricted Stock Award 05/03					3/202	/2024		A		35,033 ⁽¹⁾ A		\$0.0	0 35	35,033		D			
Restricted Stock Award 05/03				03/202	/2024		A		21,900 ⁽²⁾ A		\$0.0	0 56,933			D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of 2. 3. Transaction Date Execution Date, Security or Exercise (Month/Day/Year)			4. Transa	s, cans, warrants 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Restricted Stock Units	\$0.00	05/03/2024			J ⁽²⁾			21,900	(2)		(2)	Common Stock	21,900	\$0	0		D		

Explanation of Responses:

- 1. The Restricted Stock Award vests on April 1, 2025.
- 2. On May 3, 2024, Kiromic BioPharma, Inc. and the Reporting Person agreed to cancel the Reporting Person's 21,900 Restricted Stock Units which vest on October 1, 2024 and replace them with 21,900 Restricted Stock Awards which vest on October 1, 2024.

/s/ Brian Hungerford

05/07/2024

** 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.