FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)														
Name and Address of Reporting Person * Latkin Jed				2. Issuer Name and Ticker or Trading Symbol NAVIDEA BIOPHARMACEUTICALS, INC. [NAVB]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner X_ Officer (give title below) Other (specify below)				
(Last) (First) (Middle) 4995 BRADENTON AVE., SUITE 240				3. Date of Earliest Transaction (Month/Day/Year) 02/20/2020									Cr	EO, COO & (CFO	
(Street) DUBLIN, OH 43017				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Benefi						Beneficially (Owned					
(Instr. 3) Date			2. Transaction Date (Month/Day/Year)	Executio any	Deemed cution Date, if onth/Day/Year)	e, if Coo	(Instr. 8)		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia	nt of Securities ally Owned Following I Transaction(s) and 4)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
					C	Code	V	Amour	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		02/20/2020				P		5,000	A	\$ 1.08	17,950			D	
			Table II - 1				cquire	conta the fo	ained i orm dis	n this for splays a of, or Ben	rm are currer eficial	not requality valid	OMB conf	spond unle trol numbe	ss	1474 (9-02)
Security	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date	4.		5. Num of Deri ¹ Secu Acqu (A) o Disp of (E (Inst	5. Number		and Expiration Date (Month/Day/Year) A U S ((1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		7. Ti Amc Undo Secu (Inst 4)	ttle and bunt of erlying rrities r. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficia Ownersh : (Instr. 4)
				С	ode '	V (A)	(D)		cisable		Title	Number of Shares				

Reporting Owners

		Relationships						
Reporting Owner Name / Add	Directo	r 10% Owner	Officer	Other				
Latkin Jed 4995 BRADENTON AVE., SU DUBLIN, OH 43017	JITE 240 X		CEO, COO & CFO					

Signatures

/s/ Jed A. Latkin	02/20/2020
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.