FORM 4

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

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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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

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*  Rosol Michael Stanley  (Last) (First) (Middle)  4995 BRADENTON AVE., SUITE 240  (Street)						Issuer Name and Ticker or Trading Symbol     NAVIDEA BIOPHARMACEUTICALS, INC. [     NAVB ]      3. Date of Earliest Transaction (Month/Day/Year)     09/09/2022  4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Relationship of Reporting Person(s) to Issuer Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  Chief Medical Officer  5. Individual or Joint/Group Filing (Check Applicable Lin X Form filed by One Reporting Person			able Line)	
DUBLIN (City)	OH (State)	43 (Zi)	017 p)											Form file	d by More	than C	ne Reportin	g Person	
		Та	ble I - Nor	า-Der	ivativ	e Se	curitie	s Acq	uired, l	Disp	osed of,	or I	Benefi	cially O	wned				
Date				Date	. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)					Securities Acquired (A) or posed Of (D) (Instr. 3, 4 an			5. Amount Securities Beneficial Following	y Owned Form or In Reported (Inst		nership : Direct (D) lirect (I) . 4)	7. Nature of Indirect Beneficial Ownership
							Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock <sup>(1)(2)</sup> 09/				09/0	09/2022				A		28,15	0	A	\$0	42,	42,725		D	
Common Stock <sup>(2)</sup>				09/0	09/09/2022				A		13,00	0	A	\$0	55,	55,725		D	
Common Stock														11,3	11,320		I	Held by 401(k) Plan	
	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) (Month/Day/Year) (Month/Day/Year)			Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye		e Securities Underly		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	V (A) (D)				Expiration Date	tion or Nu		Amount or Number of Shares		Transacti (Instr. 4)				

## Explanation of Responses:

- 1. The Reporting Person elected to receive stock in lieu of a cash bonus. The number of shares was determined based on the closing price on the date of grant, September 9, 2022.
- 2. Stock Issued under the Amended and Restated 2014 Stock Incentive Plan.

/s/ Erika L. Eves for Michael S. Rosol, by power of attorney

\*\* Signature of Reporting Person Date

09/13/2022

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.