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								

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	es)														
1. Name and Address of Reporting Person *- Rosol Michael Stanley					2. Issuer Name and Ticker or Trading Symbol NAVIDEA BIOPHARMACEUTICALS, INC. [NAVB]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 4995 BRADENTON AVE., SUITE 240				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2019						Chief Medical Officer 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person						
DUBLIN, OH 43017			4. If Amendment, Date Original Filed(Month/Day/Year)													
										Form filed by More than One Reporting Person						
(City) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year		on I	Date, if Co		8) (A	Securities Acq a) or Disposed enstr. 3, 4 and 5	of (D) O	Amount of S wned Followi ransaction(s) nstr. 3 and 4)		d C F D o.	Ownership orm: Be Oirect (D) O'r Indirect (In	eneficial wnership	
Reminder:	Report on a	separate line for eac	Table II -	Derivati	ve S	Securities A	Acqu	Person contain form di	s who respond ed in this for splays a curr sed of, or Ben	rm are no rently va eficially (ot required lid OMB co	to respon	d unless the		74 (9-02)	
Security (Instr. 3)	Conversion	n Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. f Transaction Code) (Instr. 8)		5. Number of		options, convertible secur 6. Date Exercisable and Expiration Date (Month/Day/Year)			es	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial Ownershi (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)		
Stock Option	\$ 0.38	01/02/2019		A		125,000		<u>(1)</u>	01/02/2029	Commo	1172 000	\$ 0.001	125,000	D		
Repor	ting O	wners														
				Relationships												
Reporting Owner Name / Address Director 10		% Owner Officer Other														
Rosol Michael Stanley 4995 BRADENTON AVE., SUITE 240 DUBLIN, OH 43017				С	hief Med	ical	Officer									

Explanation of Responses:

Signatures

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

/s/ Jed A. Latkin for Michael S. Rosol, by power of attorney

**Signature of Reporting Person

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) 41,667 options will be exercisable on or after 1/2/2019; 41,667 options will be exercisable on or after 7/2/2019; and 41,666 options will be exercisable on or after 1/2/2020.

01/03/2019

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.