FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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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* Sangiovanni Timothy J.					2. Issuer Name <b>and</b> Ticker or Trading Symbol ZEVRA THERAPEUTICS, INC. [ ZVRA ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last)	(Fi /RA THER	rst) APEUTICS, INC	(Middle)			. Date of Earliest Transaction (Month/Day/Year) 1/31/2024						below)		Other below ate Controlle	′ I		
1180 CELEBRATION BOULEVARD, SUITE 103					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) CELEBRATION FL 34747												X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(St	·	(Zip)	Dori		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.											
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				saction	2A. Deemed Execution Dat		ed Date,	3. 4. Securi Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amou Securitie Beneficia Owned F	s Form Illy (D) ( ollowing (I) (I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code V	Amoun	t (A) o	r Price	Reported Transact (Instr. 3 a	ion(s)		(Instr. 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/Year)	Date,	Code (Instr.		n of I		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)	Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Restricted Stock Unit	(1)	01/31/2024			A		35,000		(2)	(2)	Common Stock	35,000	\$0	35,000	D		

## **Explanation of Responses:**

- 1. Each restricted stock unit represents a contingent right to receive one share of Issuer common stock. Grant to the Reporting Person of restricted stock units ("RSU").
- 2. The restricted stock units will vest and settle as to one third of the restricted stock units on January 31, 2025, and the remaining two thirds of the restricted stock units will vest and settle in equal annual installment thereafter, subject in each case to the Reporting person's ongoing employment.

/s/ Timothy J. Sangiovanni

02/02/2024

\*\* Signature of Reporting Person

Date

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.