SEC Form 4					
FORM 4	UNITED STA				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).		DAT OF CHANGES IN BENEFICIAL OWNE d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940	ERSHIP	OMB Number: Estimated average I hours per response:	
1. Name and Address of Reporting Person <u>DIXON WENDY L</u>		2. Issuer Name and Ticker or Trading Symbol <u>ZEVRA THERAPEUTICS, INC.</u> [ZVRA] 3. Date of Earliest Transaction (Month/Day/Year) 05/13/2024	5. Relationship of R (Check all applicabl X Director Officer (giv	e) 10 10 ve title Ot)% Owner ther (specify
(Last) (First) C/O ZEVRA THERAPEUTICS, IN 1180 CELEBRATION BOULEVA (Street) CELEBRATION FL		4. If Amendment, Date of Original Filed (Month/Day/Year)			Person
(City) (State)	(Zip)	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a the affirmative defense conditions of Rule 10b5-1(c). See Instruction		written plan that is inte	nded to satisfy
т	able I - Non-Deriv	ative Securities Acquired, Disposed of, or Benefi	cially Owned		

Table 1 - Non-Derivative Securities Acquirea, Disposed of, or Deriencially Owned											
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	 Reported Transaction(s) (Instr. 3 and 4) 		(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)	4. Transa Code (8)				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	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	4	Transaction(s) (Instr. 4)		
Stock Option (right to buy)	\$4.89 ⁽¹⁾	05/13/2024		Α		39,200 ⁽²⁾		(3)	05/12/2034	Common Stock	39,200	\$0	39,200	D	

Explanation of Responses:

1. The exercise price is equal to the closing price of the Issuer's common stock on the Nasdaq Global Select Market on the date of grant, May 13, 2024.

This grant was awarded as compensation for the Reporting Person's service on the Issuer's board of directors pursuant to the Issuer's ninth amended and restated non-employee director compensation policy.
 One hundred percent (100%) of the shares subject to the option shall vest on the earlier of (i) the first anniversary of the date of grant, (ii) one day prior to the date of the first annual meeting of the Issuer's stockholders following the date of grant or (iii) immediately prior to a change in control of the Issuer, subject in each case to the Reporting Person's continued service on such vesting date.

<u>/s/ Timothy J. Sangiovanni,</u>	
Attorney-in-Fact for Wendy L.	05/15/2024
Dixon	

** 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.