SEC For	m 4 FORM	4	UNITEI) ST		S SI	ECUR	ITIE	ES AND	EXCHA		омм	ISSION					
				JNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549												OMB APPROVAL		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					ENT	OF	CHAI	NGE	ES IN BI	ENEFIC	VNER	RSHIP OMB Number: Estimated average hours per response			verage burde	3235-0287 n 0.5		
									a) of the Secu Investment (1934							
transac contrac the pur securit to satis	chase or sale of ies of the issue ify the affirmativ ons of Rule 10t	pursuant to a written plan for of equity that is intended ve defense																
1. Name and Address of Reporting Person [*] Adams Jennifer McKie						2. Issuer Name and Ticker or Trading Symbol <u>Eton Pharmaceuticals, Inc.</u> [ETON]							5. Relationship of Reporting Person(s) to Is (Check all applicable)			. ,		
				- 3	3. Date of Earliest Transaction (Month/Day/Year)							Officer	(give title	ve title Other (s below)				
(Last) (First) (Middle) C/O ETON PHARMACEUTICALS, INC.						01/03/2025							below)			Delow)		
21925 W. FIELD PARKWAY, SUITE 235						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) DEERPARK IL 60010-7208													Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																		
		Tab	ole I - Nor	n-Deri	vativ	e Se	curities	s Ac	quired, D	isposed (of, or Be	neficia	lly Owned			3		
1. Title of Security (Instr. 3) 2. Trans Date (Month/					ear) I	2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Ins				Beneficia	es Fo ally (D Following (I)		wnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code V	Amount	(A) o (D)	Price	Reported Transact (Instr. 3 a	ion(s)		()	(Instr. 4)	
		-							uired, Dis , options				/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title an of Securit Underlyin Derivative (Instr. 3 a	ies g security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficial Ownershi (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	1					
Employee Stock Option (Right to Buy)	\$13	01/03/2025			Α		25,000		(1)	01/02/2035	Common Stock	25,000	\$0	25,00)0	D		

Explanation of Responses:

1. The shares subject to the option shall vest equally on a quarterly basis over 12 months from the date of grant until fully vested and exercisable on January 3, 2026.

Remarks:

The reporting person has authorized and designated the named person to file this Form 4 on the reporting person's behalf for indefinite duration.

/s/ James R. Gruber

01/06/2025 Date

** Signature of Reporting Person

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.