FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average b	ourden								
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

							. ,				. ,										
Name and Address of Reporting Person* Hamill John P.						2. Issuer Name and Ticker or Trading Symbol Aprea Therapeutics, Inc. [APRE]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) 3805 OL	(FI	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/28/2024									below)		Fin	Other (s below)	. ,		
	4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)										
(Street)	STOWN PA	A	18902											X		led by Mor		orting Person One Repor			
(City)	(S	tate)	(Zip)		R	ule	10b5-	1(c)	Trans	act	ion Ind	ication									
											nction was m ns of Rule 1					n or written	plan th	at is intended	to		
		Tab	le I - Nor	า-Deriง	vativ	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	nefic	ially	Owned						
Dat				Date	h/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Disposed Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4		and Securit Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	Pri	ice	Reported Transact (Instr. 3 a	on(s)			(Instr. 4)		
Common Stock			03/2	8/2024				A		3,365	(1) A	\$	\$0.00		18,868		D				
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 (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)				Date,	Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		[3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	i i ily	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amor or Numi of Share	ber							
Stock Options (Right to Buy)	\$6.69	03/28/2024			A		13,460		(2)	(03/28/2024	Common Stock	13,4	160	\$0.00	13,460	0	D			

Explanation of Responses:

- 1. These shares represent restricted stock units ("RSUs") and shall vest and be settled in the Issuer's common stock ("Common Stock") in three (3) equal annual installments beginning on March 28, 2025, until vested in full, subject to the reporting person's continued employment through and including the applicable vesting dates and subject to acceleration under certain conditions.
- 2. Twenty-five percent of these options vest on March 28, 2025, with the remaining options vesting ratably over the following 36 months, subject to the reporting person's continued employment through and including the applicable vesting dates and subject to acceleration under certain conditions.

/s/ John Hamill

03/28/2024

** 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.