## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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  Wolff Benjamin G  (Last) (First) (Middle)  C/O PALLADYNE AI CORP.  650 SOUTH 500 WEST, SUITE 150				Palladyne AI Corp. [ PDYN ]  3. Date of Earliest Transaction (Month/Day/Year) 10/31/2024							(Che	Officer (give title below)   PRESIDENT & CEO					
(Street) SALT LA CITY (City)	AKE U		84101 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year) 11/04/2024						Line)	5. Individual or Joint/Group Filing (Check Applicable ine)  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
		Ta	ble I - No	n-Deriv	ative S	Securities Ac	quired	. Dis	posed o	f, or	Bene	eficially	Owned				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,	3. 4. Securit Transaction Code (Instr.		rities Acquired (A) of Of (D) (Instr. 3, 4		A) or	5. Amount of and 5) Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct In ndirect B r. 4) O	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(	(A) or (D)	Price	Reported Transaction (Instr. 3 ar			(11	nstr. 4)
Common Stock		10/31/2024			A <sup>(1)</sup>		107,526 A		\$2.2	107,526				ee ootnote <sup>(2)</sup>			
Common	Stock												1,306,203 D		D		
Common	Stock												904				by pouse
Common	Stock												383,119 I			ee potnote <sup>(3)</sup>	
						curities Acq Ils, warrants							Owned		,	,	,
Derivative   Conversion   Date   Execution   Security   or Exercise   (Month/Day/Year)   if any		3A. Deemed Execution D if any (Month/Day/	ate, Tr	ansaction ode (Instr.	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 and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	re es ally g d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

Warrants

(right to

buy)

1. The acquisition reflected in the original Form 4 filed on November 4, 2024 ("Original Form 4") was an exempt transaction under Rule 16b-3. This amendment is being filed solely to amend the Original Form 4 to reflect the correct transaction code "A".

05/01/2025

(D)

(A)

107,526

- 2. Represents shares held by MLC Solo 401k Trust FOB Benjamin Wolff ("401k Trust"). Mr. Wolff and his spouse Julie Wolff are the trustees of the 401k Trust and share voting and dispositive power over equity held by the trust. Mr. Wolff is the sole beneficiary of the 401k Trust.
- 3. Represents shares held by Mare's Leg Capital, LLC ("MLC"). MLC is an entity wholly owned by Mr. Wolff and his spouse Julie Wolff.

 $A^{(1)}$ 

/s/ Stephen Sonne, attorney-infact on behalf of Benjamin G.

Amount

Number of Shares

107,526

11/05/2024

(Instr. 4)

107,526

footnote(2)

Wolff

Expiration Date

05/01/2030

Title

Stock

\*\* 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).

10/31/2024

\*\* 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.