The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

	OMB APPRO	OVAL
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D	OMB Number:	3235- 0076
Notice of Exempt Offering of Securities	Estimated av burden	verage
	hours per response:	4.00
	<u>.</u>	

1.	Issuer's	Identity	
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	<b>D</b> 1		
CIK (Filer ID Nun	ıber) Previous Names	None	Entity Type
0001583648	Marika Inc.		X Corporation
Name of Issue			Limited Partnership
PIERIS PHARMACEUTICA			Limited Liability Company
Jurisdiction of			General Partnership
Incorporation/Organ NEVADA	Ization		Business Trust
Year of Incorporat	ion/Organization		Other (Specify)
Over Five Years Ago	posify Voor) 2012		
X Within Last Five Years (S Yet to Be Formed	pecify Year) 2015		
ret to be ronnieu			
2. Principal Place of Business	and Contact Information		
	of Issuer		
PIERIS PHARMACEUTICA			
	ddress 1	Stree	et Address 2
255 State Street, 9th Floor			
City	State/Province/Country		Phone Number of Issuer
Boston	MASSACHUSETTS	02109	857 246 8998
3. Related Persons			
Last Name		st Name	Middle Name
Yoder	Stephen	S.	
Street Address 1	Street	Address 2	
255 State Street, 9th Floor			
City		vince/Country	ZIP/PostalCode
Boston	MASSACHUSE		
<b>Relationship:</b> X Executive C	Officer X Director Promote	er	
Clarification of Response (if	Necessary):		
Last Name	Firs	st Name	Middle Name
Deptula-Hicks	Darlene		
Street Address 1	Street	Address 2	
255 State Street, 9th Floor			
City		vince/Country	ZIP/PostalCode
Boston	MASSACHUSET	FTS 02109	
<b>Relationship:</b> X Executive 0	Officer Director Promote	er.	

**Relationship:** X Executive Officer Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Khuong	Chau	
Street Address 1	Street Address 2	
255 State Street, 9th Floor		
City Boston	State/Province/Country MASSACHUSETTS	ZIP/PostalCode 02109
<b>Relationship:</b> Executive Officer X		02109
Relationship: Executive Officer A	Director Promoter	
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Richman	Michael	
Street Address 1	Street Address 2	
255 State Street, 9th Floor		
City	State/Province/Country	ZIP/PostalCode
Boston	MASSACHUSETTS	02109
<b>Relationship:</b> Executive Officer X	Director Promoter	
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Prelack	Steven	
Street Address 1	Street Address 2	
255 State Street, 9th Floor		
City	State/Province/Country	ZIP/PostalCode
Boston	MASSACHUSETTS	02109
<b>Relationship:</b> Executive Officer X	Director Promoter	
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Bizzari	Jean-Pierre	
Street Address 1	Street Address 2	
255 State Street, 9th Floor	State/Dreavings/Country	7ID/DectalCode
City Boston	State/Province/Country MASSACHUSETTS	ZIP/PostalCode 02109
	Director Promoter	02103
Clarification of Response (if Necessa		
	• y )•	
4. Industry Group		
Agriculture	Health Care	Retailing
Banking & Financial Services	X Biotechnology	Restaurants
Commercial Banking	Health Insurance	
Insurance		Technology
Investing	Hospitals & Physicians	Computers

Agriculture Banking & Financial Services Commercial Banking	Health Care X Biotechnology Health Insurance	Retailing Restaurants Technology
Insurance Investing	Hospitals & Physicians	Computers
Investment Banking	Pharmaceuticals	Telecommunications
Pooled Investment Fund	Other Health Care	Other Technology
Is the issuer registered as	Manufacturing	Travel
an investment company under the Investment Company	Real Estate	Airlines & Airports
Act of 1940?	Commercial	Lodging & Conventions
Yes No	Construction	Tourism & Travel Services
Other Banking & Financial Services	<b>REITS &amp; Finance</b>	Other Travel

Business ServicesResidentialOtherEnergyOther Real EstateImage: ConstructionImage: ConservationEnergy ConservationEnvironmental ServicesImage: ConservationImage: ConservationOil & GasImage: ConservationImage: ConservationImage: ConservationOther EnergyImage: ConservationImage: Conservation<

## 5. Issuer Size

<b>Revenue Range</b>	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Investment Company Act Section 3(c)		
Section 3(c)(1)	Section 3(c)(9)	
Section 3(c)(2)	Section 3(c)(10)	
Section 3(c)(3)	Section 3(c)(11)	
fection 3(c)(4)	Section 3(c)(12)	
	Section 3(c)(13)	
	Section 3(c)(14)	
	5(0)(14)	
	ection 3(c)(1) ection 3(c)(2)	

- 7. Type of Filing
- X New Notice Date of First Sale 2016-06-02 First Sale Yet to Occur Amendment
- 8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes X No

9. Type(s) of Securities Offered (select all that apply)

X Equity	Pooled Investment Fund Interests
Debt	Tenant-in-Common Securities
X Option, Warrant or Other Right to Acquire Another Security	Mineral Property Securities
Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	Other (describe)

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer? Yes X No

Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$0 USD 12. Sales Compensation Recipient Recipient CRD Number X None Cowen and Company, LLC None (Associated) Broker or Dealer X None (Associated) Broker or Dealer CRD Number X None None None **Street Address 2** Street Address 1 599 Lexington Avenue State/Province/Country **ZIP/Postal** Code City New York NEW YORK 10022 State(s) of Solicitation (select all that apply) All States Foreign/non-US Check "All States" or check individual States CALIFORNIA ILLINOIS MASSACHUSETTS NEW JERSEY NEW YORK Recipient Recipient CRD Number X None Oppenheimer & Co. Inc. None (Associated) Broker or Dealer X None (Associated) Broker or Dealer CRD Number X None None None **Street Address 1 Street Address 2** 85 Broad Street State/Province/Country **ZIP/Postal** Code Citv NEW YORK 10004 New York State(s) of Solicitation (select all that apply) All States Foreign/non-US Check "All States" or check individual States CALIFORNIA ILLINOIS MASSACHUSETTS NEW JERSEY NEW YORK Recipient Recipient CRD Number X None Trout Capital LLC None (Associated) Broker or Dealer X None (Associated) Broker or Dealer CRD Number X None None None **Street Address 1** Street Address 2 740 Broadway, 9th Floor **ZIP/Postal** Code City State/Province/Country New York NEW YORK 10003 State(s) of Solicitation (select all that apply) All States Foreign/non-US Check "All States" or check individual States CALIFORNIA ILLINOIS

MASSACHUSETTS

NEW JERSEY	
NEW YORK	

13. Offering and Sales Amounts

Total Offering Amount	\$16,500,440 USD or	Indefinite
Total Amount Sold	\$16,500,440 USD	
Total Remaining to be Sold	\$0 USD or	Indefinite

Clarification of Response (if Necessary):

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

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## 15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$1,072,529 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.\*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
PIERIS PHARMACEUTICALS, INC.	/s/ Darlene Deptula-Hicks	Darlene Deptula-Hicks	Chief Financial Officer	2016-06-15

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.

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.