FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549	

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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)

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

Name and Address of Reporting Person* Calland Crois A				2. Issuer Name and Ticker or Trading Symbol HERON THERAPEUTICS, INC. /DE/							5. Re (Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Collard Craig A											K	✓ Director			10% Ov	vner				
(Lack) (Einst) (Middle)					HRTX]									Officer below)			Other (s	pecify		
(Last) (First) (Middle)				Date of Earliest Transaction (Month/Day/Year)									Chief Executive Officer							
4242 CAMPUS POINT COURT, SUITE 200				10/	10/19/2024									Chief Executive Officer						
					4. If	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) SAN DII	EGO C	A	92121											Line			_			
SAN DII	EGO C	A	92121											l s	Form filed by One Reporting Person					
(City)	(S	tate)	(Zip)												Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	Security (Ins	tr. 3)		2. Transa	ction		2A. De	emed	3.		4. Securi	ties Acq	ired	(A) or	5. Amou	nt of	6. Ow	nership	7. Nature	
···················· D			Date (Month/Day/Year)			Execution Date, if any (Month/Day/Year)		Transaction Disposed (Code (Instr. 5)		Dispose	oosed Of (D) (Instr. 3,			Securitie Beneficia				of Indirect Beneficial		
			(WOTHIND										Owned F	ollowing (l) (lr		nstr. 4)	Ownership			
										1		(A) or (D) Price		<u>.</u>	Reported Transact				(Instr. 4)	
									Code	V	Amount	(D)		Price	(Instr. 3 a					
Common Stock 10/19.				0/2024		M		13,79	13,797 A		(1)	290,387			D					
Table II - Derivative Securities Acquired D									Disn	nsed of	or Be	nefi	icially	Owned						
	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 Da if any (Month/Day/	ate, Tr	4. Transactio Code (Instr 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
								mount												
													1	lumber						
				c	ode	v	(A)	(D)	Date Exercisa		Expiration Date	Title	o S	f hares						
Restricted Stock Units	\$0.00	10/19/2024			М			13,797	(2)		(2)	Commo Stock	ⁿ 1	3,797	\$0.00	179,35	9	D		

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of common stock.
- 2. The restricted stock units vest in 16 equal quarterly installments beginning one quarter after the date of grant (01/19/2024).

/s/Kathryn Lester Attorney-infact for Craig Collard

** Signature of Reporting Person

10/21/2024

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.