SEC	Form	4

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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
issuer that is intended to satisfy the
affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

1. Name and Address of Reporting Person <sup>*</sup> Cunningham, Richard Anthony			2. Issuer Name and Ticker or Trading Symbol Anebulo Pharmaceuticals, Inc. [ANEB]	(Check	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) C/O ANEBULO PHARMACEUTICALS, INC.			3. Date of Earliest Transaction (Month/Day/Year) 04/04/2025		Director Officer (give title below) Chief Executi	10% Owner Other (specify below) ve Officer			
1017 RANCH ROAD 620 SOUTH, STE. 107           (Street)           LAKEWAY,         TX           (City)         (State)           (Zip)		78734	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	idual or Joint/Group Filing Form filed by One Rep Form filed by More tha	, ,			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									

1. Title of Security (Instr. 3) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 6. Ownership 7. Nature of 2. Transaction 2A. Deemed 5. Amount of Date Execution Date, Transaction Securities Form: Direct (D) Indirect Beneficially Owned (Month/Dav/Year) if anv Code (Instr. or Indirect (I) Beneficial 8) Following Reported (Month/Day/Year) (Instr. 4) Ownership Transaction(s) (Instr. 4) (A) or (D) (Instr. 3 and 4) Code v Amount Price

 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 Date, if any (Month/Day/Year)	4. Transac Code (In 8)				vative Expiration Date urities (Month/Day/Year) uired (A) or bosed of (D)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Stock Option (right to buy)	\$1.02	04/04/2025		Α		316,352		(1)	04/03/2035	Common Stock	316,352	\$0	316,352	D	

## Explanation of Responses:

1. One-sixteenth (1/16) of the shares subject to the option vested and became exercisable on April 4, 2025, with the remainder scheduled to vest and become exercisable in fifteen (15) equal quarterly installments on each July 15, October 15, January 15, and April 15 thereafter, vesting fully on January 15, 2029, in each case, subject to the Reporting Person's continued service to the Issuer through each vesting date.

<u>/s/ Daniel George, as attorney-in-</u> fact	04/07/2025		
** 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.