FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

~			
OMB	APL	יואי	VΔI

OMB Number:	3235-0104		
Estimated average burden			
hours per response:	0.5		

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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* <u>Lauderdale Katherine Sue</u>		2. Date of Event Requiring Statement (Month/Day/Year) 11/07/2024	3. Issuer Name and Ticker or Trading Symbol Professional Diversity Network, Inc. [IPDN]				
(Last) (First) (Middle)			Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)	
55 EAST MON SUITE 2120	ROE STREET			X	Director Officer (give title below)	10% Owner Other (specify below)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person
(Street) CHICAGO	IL	60603					Form filed by More than One Reporting Person
(City)	(State)	(Zip)					

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or	4. Nature of Indirect Beneficial Ownership (Instr. 5)
		Indirect (I) (Instr. 5)	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)			3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		Conversion Form: Direct or Exercise (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security Indirect (I) (Instr. 5)	

Explanation of Responses:

No securities are beneficially owned.

/s/ Katherine Lauderdale

11/07/2024

** 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 5 (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.