FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPE	KUVAL
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).

STATEMENT OF CHANGES IN 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

		and the second s								1			D ()		
1. Name and Address of Reporting Person* BECKER PAUL B			2. Issuer Name and Ticker or Trading Symbol WAVEDANCER, INC. [WAVD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner						
(Last) (First) (Middle) C/O WAVEDANCER, INC., 12015 LEE JACKSON MEMORIAL HWY STE 210			3. Date of Earliest Transaction (Month/Day/Year) 12/30/2021						Officer (give	e title below)	Othe	r (specify below))		
FAIRFA	X, VA 220	(Street)		4. If Ame	endme	ent, Date	Orig	ginal Filed(Mo	onth/Day/Year)	_X_	Form filed by	One Reporting	p Filing(Check Person Reporting Person	Applicable Line)	
(Cit	y)	(State)	(Zip)			Ta	ble I	- Non-Deriv	ative Securitie	s Acquired	l, Disposed	of, or Bene	ficially Owne	d	
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)		on Da	ate, if C		(/	Securities Acq A) or Disposed on str. 3, 4 and 5)	of (D) Ow Trai		Securities Boing Reporte	d (Ownership of Brown (D) Orm: Brown (D) O	Nature f Indirect eneficial ownership (nstr. 4)
							Cod	le V A	mount (D)	Price			(Instr. 4)	
					lly ow			Person	who respon	d to the c	ollection o	of informa	tion contain	ad SEC 14	174 (9-02)
					ive Se			in this f displayauired, Dispo	s who respon orm are not r s a currently sed of, or Bene overtible secur	equired to valid OMB ficially Ow	respond control n	unless the		ed SEC 14	174 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transact	tive Sets, cal	lls, warr 5. Numb	er ative s l(A)	in this f displays uired, Dispo options, co 6. Date Exe Expiration I (Month/Day	orm are not rest a currently vested of, or Benearertible securicisable and Date	equired to valid OMB ficially Ow	o respond B control n wned d Amount ving	unless the number.	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(To. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	11. Nature of Indire Benefici Ownersl (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transact	tive Sets, cal	Ils, warr 5. Numborf Derive Securitie Acquired or Disposof (D) (Instr. 3, and 5)	er ative s l(A)	in this f displays uired, Dispo options, co 6. Date Exe Expiration I (Month/Day	sed of, or Benearertible securicisable and Date //Year)	equired to valid OMB ficially Ow ities) 7. Title and of Underly Securities	o respond B control n wned d Amount ving	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natu of Indire Benefici Ownersl (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BECKER PAUL B C/O WAVEDANCER, INC. 12015 LEE JACKSON MEMORIAL HWY STE 210 FAIRFAX, VA 22033	X					

Signatures

/s/ Matthew T. Sands	01/03/2022
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Granted pursuant to and in accordance with the WaveDancer 2021 Stock Incentive Plan.
- (2) The options become exercisable as to 25,000 Options on December 30, 2022, and 25,000 Options on December 30, 2023.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.