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

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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

(Print of Type Responses)											
1. Name and Address of Reporting Person - 2. Issuer Name and Ticke TRAVERSA SERGIO RELMADA THERAPE				icker or Trading Symbol APEUTICS, INC. [RLMD]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
(Last) (First) C/O RELMADA THERAPEUT THIRD AVENUE, SUITE 2018	/ /	3. Date of Earliest Transaction (Month/Day/Year) 12/14/2015						X Officer (give title below) Other (specify below) Chief Executive Officer			
(Street) NEW YORK, NY 10017		4. If Amendment, Date Original Filed(Month/Day/Year)					r)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State)	(Zip)	Tabl	ired, Disposed of, or Beneficially	of, or Beneficially Owned							
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)		(A) or Disposed of (D)		l of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D)	Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common stock	12/14/2015		Р		30	А	\$ 2.97	320,352	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of			3A. Deemed	4.			6. Date Exer					9. Number of		11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Der	ivative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Sec	urities			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Acc	uired			(Insti	: 3 and		Owned	Security:	(Instr. 4)
	Security				(A)	or			4)			Following	Direct (D)	
					Dis	posed						Reported	or Indirect	
					of (D)						Transaction(s)	(I)	
					(Ins	tr. 3,						(Instr. 4)	(Instr. 4)	
					4, a	nd 5)								
										Amount				
							Date	Expiration		or				
							Exercisable		Title	Number				
								2000		of				
				Code V	(A)	(D)				Shares				

Reporting Owners

Den effer Orner Manual Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
TRAVERSA SERGIO C/O RELMADA THERAPEUTICS, INC. 757 THIRD AVENUE, SUITE 2018 NEW YORK, NY 10017	Х		Chief Executive Officer				

Signatures

/s/ Sergio Traversa	12/16/2015
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).

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.