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

OMB APPROVAL						
DMB Number:	3235-0287					
Estimated average burden						
ours per respon	se 0.5					

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

(Print or Ty	pe Response	s)														
Name and Address of Reporting Person * Agharkar Shreeram				2. Issuer Name and Ticker or Trading Symbol RELMADA THERAPEUTICS, INC. [RLMD]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O RELMADA THERAPEUTICS, INC., 275 MADISON AVENUE, SUITE 702				3. Date of Earliest Transaction (Month/Day/Year) 12/31/2015							r (give title belo		Other (specify b	elow)		
(Street) NEW YORK, NY 10016			4. If Amendment, Date Original Filed(Month/Day/Year)						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)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of S (Instr. 3)	(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Day	ed Date, it	3. Transaction Code (Instr. 8)		4. Securities Acq (A) or Disposed of (D) (Instr. 3, 4 and 5)		quired of	5. Amount of Securities Beneficially Owned Fol Reported Transaction(s) (Instr. 3 and 4)		ies Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	stock		12/31/2015				P		400	A	\$ 2.5	5,759			D	
			Table II - D	erivative So			t quired	onta he fo	ained in orm disp sposed of	this fo plays a f, or Ben	rm ar curre	e not req ently valid	uired to re d OMB co	nformation espond unl ntrol numb	ess	EC 1474 (9- 02)
Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Y	3A. Deemed Execution Da	te, if Transa Code	action 8)	5. Nu of	mber ative ities ired r osed) . 3,	6. Da and I (Mor	ate Exerc Expiration hth/Day/\frac{\frac{1}{2}}{2}	isable n Date Year)	7. T Ame Und Sect (Ins 4)	Amount or Number of Shares	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivati Security Direct (I or Indire	Ownership (Instr. 4) cct
Repor	ting O	wners														

Daniel Communication (Addison	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Agharkar Shreeram C/O RELMADA THERAPEUTICS, INC. 275 MADISON AVENUE, SUITE 702 NEW YORK, NY 10016	X					

Signatures

/s/ Shreeram Agharkar	01/05/2016
**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.