FORM	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/h)

#### 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

Form 5 obligations may Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Instruction 1(b). Company Act of 1940

(rint of Type Responses)												
1. Name and Address of Reporting Person <sup>*</sup> TRAVERSA SERGIO			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) C/O RELMADA TH THIRD AVENUE,	· · · · · · · · · · · · · · · · · · ·	10 000	3. Date of Earliest Transaction (Month/Day/Year) 07/29/2019					X_Officer (give title below) Oth Chief Executive Off	er (specify below icer	v)		
(Street) NEW YORK, NY 10022			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 Acqui					iired, Disposed of, or Beneficially Owned	1			
1.Title of Security (Instr. 3)	-			3. Transaction Code (Instr. 8)		(A) or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial	
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	

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

Persons who respond to the collection of information contained in SEC 1474 (9-02) 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, caus, warrants, options, convertible securities)														
Security (Instr. 3)	Conversion	(Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	tion )	5. Number of Derivative		6. Date Exer Expiration I (Month/Day	Date	and 7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	nstr. 5) Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date		Amount or Number of Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	
Options to purchase common stock		07/29/2019		А		1,700,000		(1)	07/29/2029	Common Stock	1,700,000	\$ 2.2	1,700,000	D	

## **Reporting Owners**

		Relationships						
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
( 8	TRAVERSA SERGIO C/O RELMADA THERAPEUTICS, INC. 880 THIRD AVENUE, 12TH FLOOR NEW YORK, NY 10022	Х		Chief Executive Officer				

## Signatures

/s/ Sergio Traversa	07/30/2019	
**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) Pursuant to the terms of the company's 2014 Stock Option and Equity Incentive Plan, 6.25% of the options shall vest each quarter from the date of grant. In addition, 850,000 options shall be cancelled if Relmada's common stock is not approved for listing on the Nasdaq Stock Market LLC by December 31, 2019.

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.