FORM 4

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

OMB APPROVAL
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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).

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

	Responses	5)													
Name and Address of Reporting Person * Shenouda Maged			2. Issuer Name and Ticker or Trading Symbol RELMADA THERAPEUTICS, INC. [RLMD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)XDirector10% Owner						
(Last) (First) (Middle) C/O RELMADA THERAPEUTICS, INC., 880 THIRD AVENUE, 12TH FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 10/21/2019					-	Office	r (give title belo	w)	Other (specify b	elow)		
(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 Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)		I	2. Transaction Date (Month/Day/Year)			(Instr. 8)		4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		f (D) Beneficia Reported		nt of Securities ally Owned Following I Transaction(s)		Ownership Form:	Beneficial
				(Month/Day/	onth/Day/Year)		V	(A) or Amount (D) Price		nd 4)		\ /	Ownership (Instr. 4)		
Common Sto	ock	1	10/21/2019			P	!	978		\$ 23	2,228			D	
				Derivative Sec			the fo	orm dis posed o	plays a c	curren eficially	itly valid		spond unle rol numbe		
1. Title of 2. Derivative Con	nversion		3A. Deemed	e.g., puts, call		rrants, op 5.	1 -			ities)					
Security or E (Instr. 3) Pric Der	Exercise ce of rivative curity			te, if Transac Code Year) (Instr. 8		Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	and Ea (Mont	te Exerc xpiratio th/Day/\frac{1}{2}		Amor Unde Secur	tle and unt of erlying rities r. 3 and		9. Number Derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Ownersh (Instr. 4) D)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Shenouda Maged C/O RELMADA THERAPEUTICS, INC. 880 THIRD AVENUE, 12TH FLOOR NEW YORK, NY 10022	X					

Signatures

/s/ Maged Shenouda	10/21/2019
**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).

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.