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
In stars at a 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

(Print of Type Responses)											
1. 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) Director 10% Owner			
(Last) (First) C/O RELMADA THERAPEUTICS, IN PONCE DE LEON BLVD, 3RD FLOO	NC., 2222 1	3. Date of Earliest Transaction (Month/Day/Year) 12/17/2021					X_Officer (give title below) Other Chief Financial Officer	er (specify below cer	w)		
(Street) CORAL GABLES,, FL 33134	4	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Cheek 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) 2. Transaction Date (Month/Day/Y		Execution Date, if any	Code (Instr. 8)		(A) or Disposed of (D)			Transaction(s)	Ownership Form: 0f Indirec Beneficia	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)														
1. Title of			3A. Deemed	4.		5. Number of 6. Date Exercisable and						9. Number of		11. Nature	
	Conversion		Execution Date, if	Transact	ion	Derivative	Derivative Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		Securities		(Month/Day/Year	;)	Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Acquired (A)			(Instr. 3 and 4)		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					or Dispose	d of						Owned	Security:	(Instr. 4)
	Security					(D) .				1			Following	Direct (D)	
	, , , , , , , , , , , , , , , , , , ,					(Instr. 3, 4,							Reported	or Indirect	
						and 5)	·, ·,					Transaction(s)			
						,			Ī				(Instr. 4)	(Instr. 4)	
								_			Amount			(
									Expiration	Title	or				
									Date		Number				
				Code	V	(A)	(D)				of Shares				
Stock															
Option	¢ 10.02	10/17/2021				227 510			12/17/2021	Common Stock	227 519	¢ 0	227 519	D	
(right to	\$ 19.03	12/17/2021		A		227,518		03/17/2022 <mark>(1)</mark>	12/1//2031	Stock	227,518	\$ 0	227,518	D	
										Stook					
buy)															

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Shenouda Maged C/O RELMADA THERAPEUTICS, INC. 2222 PONCE DE LEON BLVD, 3RD FLOOR CORAL GABLES,, FL 33134			Chief Financial Officer					

Signatures

/s/ Maged Shenouda	12/21/2021	
**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) The option vests in 16 equal quarterly installments commencing on March 17, 2022.

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.