FORM 4

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

OMB APPRO	VAL
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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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person *- GLASSPOOL JOHN			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							
C/O REL	(Last) (First) (Middle) C/O RELMADA THERAPEUTICS, INC., 2222 PONCE DE LEON BLVD, 3RD FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 12/17/2021							-	Offic	er (give t	itle below)	Othe	r (specify below)		
CORAL	(Street) CORAL GABLES,, FL 33134			4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group FilingCheck Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(Cit	ty)	(State)	(Zip)	Table I - Non-Derivative Securities Acqui						Acquire	ired, Disposed of, or Beneficially Owned							
(Instr. 3) Date		2. Transaction Date (Month/Day/Ye	ear) any		med on Date, if Day/Year)	Coo (Ins	5. Transaction Code Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		(D) Ov Tra	5. Amount of Securities Ben Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Direct (D) or Indirect	Beneficial Ownership		
							(Code V Amount (D) Price				(I) (Instr. 4)						
			Table I					cquired	, Dispo	sed of	alid OMB , or Benefi ble securit	cially Ow		er.				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) f ive	Execution Date, if	4. Transaction Code		5. Number		6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title of Unde Securiti	derlying ities			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(Ownersh Form of Derivativ Security: Direct (D or Indirect (s) (I)	Beneficia Ownershi (Instr. 4)
				Code	V	(A)	(D)	Date Exercis	sable	Ex Da	piration ite	Title	or N of	umber		(Instr. 4)	(Instr. 4)	
Stock Option (right to buy)	\$ 19.03	12/17/2021		A		58,765		03/17/	/2022 <mark>(</mark>	1) 12	2/17/2031	Comm	15	8,765	\$ 0	58,765	D	

Reporting Owners

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

Signatures

/s/ John Glasspool	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.
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