## FORM 5

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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Form 3 Holdin	ngs Reported.																	·		
Form 4 Transa	actions Reporte	ed.			Filed pursua or Se					ies Exchang mpany Act o		f 1934								
1. Name and Address of Reporting Person *						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer						
Kelly Paul Edward					RELN	RELMADA THERAPEUTICS, INC. [ RLMD ]								(Check all applicable)  X Director 10% Owner						
(Last)	(First)	(1)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2022								Officer (give title below)				Other (s below)	pecify				
C/O RELMADA THERAPEUTICS, INC. 2222 PONCE DE LEON BLVD, 3RD FLOOR				4. If Ame	If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person							
(Street)														Form filed	by More	than Or	ne Reportino	Person		
CORAL GABLES FL 33134																				
(City) (State) (Zip)																				
	<u> </u>	Т	able I -	Non-De	rivative S	Securi	ties Acc	quire	d, Dis	posed o	f, or E	Benefici	ially Ow	/ned						
1. Title of Security (Instr. 3)  2. Transaction Date						2A. Deemed 3. Execution Date. Transac			4. Securities Acquired (A) or Disposed Of					5. Amount of Securities	6. Owners			ature of		
			if any			str.	Amount		A) or D)	Price		Securities Beneficially O at end of Issue Fiscal Year (In and 4)	vned (D) or Ind r's (I) (Instr.		irect Ben	eficial iership				
			Table I	II - Deriv	rative Se	curitie	s Acqu	ired,	Dispo	sed of,	or Be	neficial								
				(e.g.,	puts, ca	lls, wa	rrants,	optio	ons, c	onvertib	le sec	urities	)							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 9		6. Date Exerc Expiration D (Month/Day/		ite	7. Title and Amour Securities Underly Derivative Securit 3 and 4)		rlying	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporte	ve es ially	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
						(A)		Date Exercisable		Expiration	Title		Amount or Number of		Transaction(s) (Instr. 4)					
							(D)			Date			Shares							
Stock Option (right to buy)	\$13.8	07/08/2021			G <sup>(1)</sup> 5		6,400		(2)	11/12/2025	Common Stock		4,800	\$0	41		D			
Stock Option (right to buy)	\$8.8	07/08/2021			G <sup>(1)</sup> 5		19,600		(3)	07/29/2029	Comr	non Stock	19,600	\$0	130,4	400	D			
Stock Option (right to buy)	\$43.47	07/08/2021			G <sup>(1)</sup> 5		56,000		(4)	12/19/2029	Comr	non Stock	56,000	\$0	94,0	00	D			
Stock Option	\$33.43	07/08/2021			G <sup>(1)</sup> 5		18,000		(5)	01/07/2031	Comr	non Stock	18,000	\$0	132,0	000	D			

## **Explanation of Responses:**

- 1. Represents a bona fide gift of stock options to family members and a family trust. An independent trustee is trustee of the trust.
- 2. The options were granted on November 12, 2015. 25% of the options vested one year from the grant date and the remaining 75% of the options vested in equal quarterly increments of 6.25% of the initial option grant over the following three year period.
- 3. The options were granted on July 29, 2019. 6.25% of the options vest each quarter from the date of grant.
- $4. \ The \ options \ were \ granted \ on \ December \ 19, 2019. \ 6.25\% \ of \ the \ options \ vest \ each \ quarter \ from \ the \ date \ of \ grant.$
- 5. The options were granted on January 7, 2021. 6.25% of the options vest each quarter from the date of grant.

/s/ Paul E. Kelly

02/02/2023

\*\* Signature of Reporting Person

Date

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

- \* 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.