FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20049

OMB APPROVAL

OMB Number: 3235-020

OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Section	on 30(I	n) of the	investn	ent C	company Ac	of 1940							
1. Name and Address of Reporting Person*  MATHIESEN JEFFREY S						2. Issuer Name <b>and</b> Ticker or Trading Symbol Gemphire Therapeutics Inc. [ GEMP ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) (First) (Middle) 17199 N. LAUREL PARK DRIVE, SUITE 401						3. Date of Earliest Transaction (Month/Day/Year) 08/10/2017									r (give title )	ncial	Other (specif below)		
(Street) LIVONIA MI 48152 (City) (State) (Zip)					- 4. If	4. If Amendment, Date of 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					
		Tab	le I - Noi	n-Deriv	/ative	e Se	curit	ies Ac	cquire	d, D	isposed	of, or B	eneficia	lly Owne	d				
1. Title of Security (Instr. 3)  2. Trans Date (Month/					saction	ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Trai	3. 4. Transaction D Code (Instr. 5)		. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		5. Amou Securiti Benefic Owned	unt of es ially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Cod	e V	Amount	(A) (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 08/10/						2017		М		3,00	,000 A \$		9 10	0,927		D			
		7									posed of			y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,		ransaction Code (Instr.				Exercion Da Day/\		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	is Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$3.59	08/10/2017			М			3,000	09/25/2	015	09/24/2025	Common Stock	3,000	\$0	0		D		

**Explanation of Responses:** 

/s/ Gabrielle Sims, by Power of 08/11/2017

<u>Attorney</u>

\*\* 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.