FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
	OMB Number:	3235-0287									
l	Estimated average burden										
l	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 30(h) of the Investment Company Act of 1940

1. Name an	2. Issuer Name and Ticker or Trading Symbol Gemphire Therapeutics Inc. [GEMP]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner									
(Last) 17199 N. SUITE 4		3. Date of Earliest Transaction (Month/Day/Year) 07/24/2019									v Of	ficer (give title low)		(specify					
(Street) LIVONIA MI 48152 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Lir	ie) <mark>X</mark> Fo	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	e I - Non	n-Deriva	ative	Sec	uritie	s Acc	quired	, Dis	posed o	f, or	Bene	ficia	lly Ow	ned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)) E:	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			d Sec Ben Owi	mount of urities eficially ned Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amount		(A) or (D)	Price	Trai	nsaction(s) tr. 3 and 4)		(iiisti. 4)				
Common Stock 07/24/2							2019		A		300,00	00	A	\$0		300,000	D		
		Та	ıble II - D								sed of, onvertib				Owne	ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Transaction Code (Ins					6. Date I Expirati (Month/I	on Dat		Amount of			8. Price of Derivativ Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				,	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

<u>/s/ Stephanie Swan, by Power of Attorney</u>

07/26/2019

** 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.