FORM 4

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

Washington, D.C. 20549

OMB APPROVAL							
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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Baluch Khoso				2. Issuer Name and Ticker or Trading Symbol Processa Pharmaceuticals, Inc. [ PCSA ]										ationship of F all applicab Director		Person(	(s) to Issuer	vner	
(Last)	(First)	,	iddle)		3. Date of Earliest Transaction (Month/Day/Year) 02/09/2023									Officer (g below)	ive title		Other (s below)	specify	
C/O PROCESSA PHARMACEUTICALS, INC. 7380 COCA COLA DRIVE, SUITE 106				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv	dividual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(Street) HANOVER	MD	21	076												Form file	d by More	than O	ne Reportin	g Person
(City)	(State)	(Zi <sub>l</sub>	p)																
		Та	ble I - No	n-Deri	ivativ	e Se	curitie	s Acq	uired, l	Disp	osed of,	or E	3enefi	cially Ow	ned				
Date				te E		2A. Deemed Execution Date, if any (Month/Day/Year)				ties Acquired (A) or i Of (D) (Instr. 3, 4 an			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 02/0					09/202	3			A		12,500 A		\$0.8	12,5	12,500		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)  2. Conversion Date (Month/Day/Year)  3. Transaction Date Execution Date if any (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year)			Code (Instr.			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable a Expiration Date (Month/Day/Year)		te	and 7. Title and An Securities Und Derivative Sec (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V (A)			(D)	Date Exercisa		or Expiration Nu		Amount or Number of Shares	(Instr. 4		on(s)				

**Explanation of Responses:** 

/s/ Khoso Baluch by Neda Sharifi,

as Attorney-in-fact

\*\* Signature of Reporting Person

Date

02/10/2023

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

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$ 

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).