## FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
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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 Type	• •	* * *		2 [ ]		a militi	T 1: C	1	5 1	Relationsh	in of Report	ing Person(s)	to Issuer	
Name and Address of Reporting Person –  Lin Patrick			-	2. Issuer Name and Ticker or Trading Symbol Processa Pharmaceuticals, Inc. [PCSA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O PROCESSA PHARMACEUTICALS, INC., 7380 COCA COLA DRIVE, SUITE 106			CALS,	3. Date of Earliest Transaction (Month/Day/Year) 09/30/2021					X	X_Officer (give title below) Other (specify below) Chief Business - Strategy Off				v)
HANOVE	(Street) NOVER, MD 21076			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City)		(State)	(Zip)		7	Γable I - 1	Non-Deriva	tive Securiti	es Acquired	uired, Disposed of, or Beneficially Owned				
1.Title of Sec (Instr. 3)	curity	1	2. Transaction Date Month/Day/Year)	2A. Deemed Execution D any (Month/Day	ate, if	3. Trans Code (Instr. 8)	(A) (Ins	ecurities Acc or Disposed tr. 3, 4 and 5	of (D) Ow Trai (Ins	5. Amount of Securities Beneficial Owned Following Reported Transaction(s) (Instr. 3 and 4)		ed	Ownership of Form: I Direct (D) or Indirect (I)	Beneficial Ownership
						Code	V Am	ount (D)	Price				(Instr. 4)	
Reminder: Re							Doreone							
Reminder: Re				Derivative S			form dispose	d in this fo plays a cur	rm are not rently valic neficially Ov	required I OMB co	to respon	d unless th		474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date,	4. if Transacti Code	5. See Ac (A Disort (In		containe form disp red, Dispos	d in this for blays a cured of, or Bervertible securitisable ion Date	rm are not rently valic neficially Ov	required i OMB co	to respondent of number of the second number of the	d unless the ber.  9. Number of	of 10. Ownersh Form of Derivativ Security: Direct (D or Indirec	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, any	(e.g., puts, ca 4. Transacti Code ar) (Instr. 8)	5. See Ac (A Disort (In	nrrants, on Number rivative curities quired of or spoosed (D) str. 3, 4, 15)	containe form disp red, Dispose options, conv 6. Date Exe and Expirat	ed of, or Bervertible securcisable ion Date y/Year)	rm are not rently valid meficially Overities)  7. Title and of Underlyi Securities (Instr. 3 and	required i OMB co	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Ownersh Form of Derivativ Security: Direct (D or Indirect (s) (I)	11. Natur of Indirec Beneficia Ownershi (Instr. 4)

		Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Lin Patrick C/O PROCESSA PHARMACEUTICALS, INC. 7380 COCA COLA DRIVE, SUITE 106 HANOVER, MD 21076			Chief Business - Strategy Off			

### **Signatures**

/s/ Patrick Lin by Michael B. Kirwan, as Attorney-in-Fact	10/04/2021
**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) Each Restricted Stock Unit represents a contingent right to receive one share of the Issuer's common stock upon the earliest of: termination of employment; the third anniversary of the award date; a change of control; or the reporting person's death.

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.