FORM 4	ŀ
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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).	

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

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

### 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

1. Name and Address Floyd Robert Mic	2. Issuer Name <b>a</b> Processa Pharm					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) C/O PROCESSA INC., 7380 COCA	3. Date of Earliest 10/06/2021	Transactio	on (M	Ionth/Day/	Year)	X         Officer (give title below)         Other (specify below)           Chief Operating Officer					
HANOVER, MD	4. If Amendment,	Date Origi	nal F	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					
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)			Execution Date, if	Code (Instr. 8)		(A) or Disposed of (D) H (Instr. 3, 4 and 5) H		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock		10/06/2021		М		12,500 (1)	А	(1)	14,500	D	
Common Stock		10/06/2021		F		4,663	D	\$0	9,387	D	
Common Stock									117,409	Ι	by Elion Oncology, Inc.

 Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.
 Persons who respond to the collection of information contained in this form are not required to respond unless
 SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on 1	Number		and Expiration	on Date	Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code				(Month/Day	/Year)	Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	]	Derivative				Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				1	Securities				(Instr. 3 and			Owned	Security:	(Instr. 4)
	Security					Acqui				4)			0	Direct (D)	
					(A) or								1	or Indirect	
					Disposed								Transaction(s)	< / <	
					of (D)							(Instr. 4)	(Instr. 4)		
						(Instr. 3,									
					4	4, and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excretisable	Date		of				
				Code	V	(A)	(D)				Shares				

# **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Floyd Robert Michael C/O PROCESSA PHARMACEUTICALS, INC. 7380 COCA COLA DRIVE, SUITE 106 HANOVER, MD 21076			Chief Operating Officer					

### Signatures

/s/ Michael Floyd by Michael B. Kirwan, as Attorney-in-Fact	
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\*\*Signature of Reporting Person

10/08/2021 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) Vesting of restricted stock.

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

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