FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
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nours per response	e 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 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 or										-					
Name and Address of Reporting Person* Bigora Sian			2. Issuer Name and Ticker or Trading Symbol Processa Pharmaceuticals, Inc. [PCSA] 3. Date of Earliest Transaction (Month/Day/Year) 08/05/2022 4. If Amendment, Date Original Filed(Month/Day/Year)						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Chief Development Officer						
(Last) (First) (Middle) C/O PROCESSA PHARMACEUTICALS, INC., 7380 COCA COLA DRIVE, SUITE 106								elow)							
(Street) HANOVER, MD 21076								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)		Tabl	le I - No	1-Deri	ivative S	ecurities	Acqui	ired, Dispo	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		A. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		of (D)	D) Beneficially Owned Following Reported Transaction(s)		ollowing	Ownership Form:	Beneficial		
				(Monui/Day/10	cai)	Code	V	Amoun	(A) or (D)	Price	(msu. 3 ai	(I)		or Indirect	
Common	Stock		08/05/2022			M		7,601	A	<u>(1)</u>	403,019			D	
	Ctaals										133,353			I	By CorLyst,
Common	Stock										Í				LLC
		separate line for	r each class of secur	ities beneficially			Perso conta the fo	ons wh ained ir orm dis	o respon this for plays a	m are	the collec e not requ ntly valid		ormation spond unle rol numbe	ss	LLC 1474 (9-02)
Reminder:	Report on a s		Table II - I	Derivative Secu	ırities , warı	s Acquir rants, op	Perso conta the fo ed, Dis	ons wh ained ir orm dis sposed o	o respon this for plays a of, or Ben ible secur	m are curre eficial rities)	the collecte not requestly valid	ired to res	pond unle	ss r.	1474 (9-02)
Reminder:	Report on a s	3. Transaction Date (Month/Day/Y	Table II - I	Derivative Secu	5. on No of Do See Ad (A Di of (Ir	Acquir rants, op	Persoconta the for ed, Dis- tions, 6. Da and E (Mon	ons wh ained ir orm dis	o respon this for plays a of, or Ben ible securisable n Date	eficial rities) 7. Tanda	the collec e not requ ntly valid	OMB cont	pond unle	of 10. Owners: Form of Derivati Security Direct (or Indire	11. Natur of Indirect Beneficia Ownersh (Instr. 4)

Reporting Owners

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

Signatures

/s/ Sian Bigora by Michael B. Kirwan, as Attorney-in-Fact	08/09/2022
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) Vesting of time-based restricted shares.

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.