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

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person * Stanker James H					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					
C/O PRO	(Last) (First) (Middle) PROCESSA PHARMACEUTICALS, 7380 COCA COLA DRIVE, SUITE 106					Earliest Transaction (Month/Day/Year) 22							X Officer (give title below) Other (specify below) Chief Financial Officer				elow)
(Street) HANOVER, MD 21076					4. If Amendment, Date Original 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												
(Instr. 3) Date		2. Transacti Date (Month/Day	Exe y/Year) any	Deemed ecution Date, in	(Instr. 8)		ction	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	mount of Securities eficially Owned Following orted Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
				(IVIC	энш/ Дау/	i cai		ode	V	Amoun	(A) or (D)	Price	(Instr. 3 and 4)			or Indirect (I) (Instr. 4)	
Common	Stock		08/05/202	22]	M		7,601	A	(1)	51,712			D	
Common Stock 08/05/2022		22				F				\$ 3.17	49,250			D			
Reminder:	Report on a s	separate line f	or each class of	of securities		•			Perseconta	ons wh ained ii orm dis	o respon this for plays a	m are	not requesting ntly valid		ormation spond unlestrol number	s	1474 (9-02)
4 501 0	I.		Ja. 7		1 /			ts, opt			tible secu					0 10	Leave
	Derivative Conversion or Exercise (M.		ise (Month/Day/Year) any (Month/Day/Y		tte, if Transaction I Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Und Secu	ount of erlying arities tr. 3 and Derivative (Instr. 5)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct (1) or Indire	Ownersh (Instr. 4)	
					Code	V	(A)	(D)	Date Exer		Expiration Date	n Title	Amount or Number of Shares				

Reporting Owners

	Reporting Owner Name / Address		Relationships					
			10% Owner	Officer	Other			
	Stanker James H C/O PROCESSA PHARMACEUTICALS, INC. 7380 COCA COLA DRIVE, SUITE 106 HANOVER, MD 21076			Chief Financial Officer				

Signatures

/s/ James H. Stanker 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.