FORM 4

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

Nashington,	D.C.	20549
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Check this box if no longer subject to						
Section 16. Form 4 or Form 5						
obligations may continue. See						
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
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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*  COHEN SETH					2. Issuer Name and Ticker or Trading Symbol  DMK PHARMACEUTICALS Corp [ DMK ]							<b>K</b> ]	Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last)	(Fi	rst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/16/2023							X	Officer (give title below)		Other (specify below)			
C/O DMK	K PHARMA	ACEUTIALS CO	ORPORATIO	ON											Cl	FO		
11622 EL CAMINO REAL, SUITE 100			İ	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)								
				,,							X Form filed by One Reporting Person							
(Street)														Form fi	led by More	than On	ne Report	ting Person
SAN DIE	GO CA	A	92130	ŀ	D   40  5 4( ) T   "     "   "								1					
-					Rule 10b5-1(c) Transaction Indication													
(City)	(Si	rate)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the													
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date				2A. Deemed Execution Da if any (Month/Day/Y		n Date,	Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and 5) Securitie		s ally Owned	Form: D (D) or In	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amoun	nt (A) or (D)		rice	Transaction(s) (Instr. 3 and 4)				(IIISU.4)	
	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 or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Cod	Transaction Code (Instr.		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)		7. Title and Amour Securities Underly Derivative Security (Instr. 3 and 4)		ying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported	y Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	• V	(A)	(D)	Date Exercisable		piration te	Title	Amou or Numb of Sh	oer		Transaction (Instr. 4)	n(s)		
Employee Stock Option (right to buy)	\$0.6016	10/16/2023		A		151,416		(1)	10/	16/2033	Common Stock	151,	416	\$0	151,416	5	D	

## Explanation of Responses:

1. The option vests and becomes exercisable as to 1/8 of the total number of shares subject to the option on the six-month anniversary of the grant date and thereafter monthly with respect to 1/48 of the total number of shares subject to the option.

/s/ Seth A.Cohen

10/25/2023

\*\* Signature of Reporting Person

Date

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

- \* 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).

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.