FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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 of Reporting Person* <u>Clifton R. LaDuane</u>						2. Issuer Name and Ticker or Trading Symbol KEMPHARM, INC [KMPH]									k all applic Directo	able) r	g Pers	10% Ow	ner	
(Last) (First) (Middle) C/O KEMPHARM, INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/25/2019									below)	(give title), Secreta	ry &	Other (s below) Treasurer	респу		
1180 CELEBRATION BOULEVARD, SUITE 103					4. 11	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) CELEBRATION FL 34747					The second secon								ine) X	9)						
(City) (State) (Zip)															1 (1301)					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ar) l	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) or i Of (D) (Instr. 3, 4 a		nd Securitie Beneficia		es For ally (D) Following (I) (: Direct C Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code V	, ,	Amount	(A) oi (D)	Price	Transacti		ion(s)			(Instr. 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 Da if any (Month/Day/	ate, T	4. Transa Code (I 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisal Expiration Date (Month/Day/Year)		of Securities		ies g Securit	Derivat Securit		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	V	(A)	(D)	Date Exercisable		piration te	Title	Amour or Number of Shares	er						
Stock Option (right to buy)	\$0.5161	11/25/2019			A		36,000		(1)	11//	/24/2029	Common Stock	36,00	0	\$0	36,000)	D		

Explanation of Responses:

1. Grant to the Reporting Person of a stock option under the Issuer's 2014 Equity Incentive Plan (the "Plan"). 100% of the shares underlying the option will vest upon the acceptance of a new drug application for the Company's product candidate, KP415, by the U.S. Food and Drug Administration, provided that at the relevant vesting date such optionee's employment relationship has not been terminated as defined in the Plan. All shares underlying the option will vest in full and become immediately exercisable upon a change of control of the Issuer or if the Reporting Person is terminated without cause or resigns for good reason. The option expires ten years after the date of grant.

/s/ R. LaDuane Clifton

11/27/2019

** 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.