FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ION	OMB APPROVAL									
	OMB Number:	3235-0287								
_	Estimated average burden									
P	hours per response:	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

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>Tierney David S</u>				KEN	2. Issuer Name and Ticker or Trading Symbol KEMPHARM, INC [KMPH]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	`	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/22/2018									Officer (below)	Officer (give title below)		Other (s below)	pecify
C/O KEMPHARM, INC. 2500 CROSSPARK ROAD, SUITE E126					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	VILLE IA		52241										X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate) (Zip)																
		Tab	le I - N	on-Deriv	ative S	Sec	urities /	Acq	uired, D	isp	osed of	, or Be	nef	icially	Owned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution Dat			Transaction Disposed Code (Instr. and 5)		ties Acquired (A) c i Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned Followin	es Fo ally (D) Ind	Form (D) or Indire	rm: Direct o) or B direct (I) O	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
											Amount	(A) (D)	or	Price Reported Transact (Instr. 3			ion(s)		msu. 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		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		str. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	V (A) (D)				Expiration Date	0 N		umber		Transaction(s) (Instr. 4)			
Stock Option (right to buy)	\$6.1 ⁽¹⁾	05/22/2018			A		15,000 ⁽²⁾		(3)		05/21/2028	Commo Stock	n 1:	5,000	\$0	15,00	0	D	

Explanation of Responses:

- 1. The exercise price is equal to the closing price of the Issuer's common stock on the Nasdaq Global Market on the date of grant, May 22, 2018.
- 2. This grant was awarded as compensation for the Reporting Person's service on the Issuer's board of directors pursuant to the Issuer's non-employee director compensation policy.
- 3. One hundred percent (100%) of the shares subject to the option shall vest on the earlier of (i) the first anniversary of the date of grant, (ii) one day prior to the date of the first annual meeting of the Issuer's stockholders following the date of grant or (iii) immediately prior to a change in control of the Issuer, subject in each case to the Reporting Person's continued service on such vesting date.

/s/ Timothy J. Sangiovanni, Attorney-in-Fact for David S. 05/24/2018 Tierney

** 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.