FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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).

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>Johnson Gordon K</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol KEMPHARM, INC [KMPH]									Check	all app	licable)			Owner (specify	
	Last) (First) (Middle) C/O KEMPHARM, INC. 1500 CROSSPARK ROAD, SUITE E126					3. Date of Earliest Transaction (Month/Day/Year) 10/10/2018										X	belov		ness C	below)	
(Street)	Street) CORALVILLE IA 52241					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Indivi ine) X					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date			3. Transa Code ( 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				4 and 5) Se Be Ov		i. Amount of Gecurities Beneficially Dwned Following		ership Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership	
											v	Amount	(	(A) or (D) Prid			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 10/10/2								2018		P		2,000		A	\$2.6		8,000		]	D	
Common Stock 10/10/2							2018			P		1,000	1,000 A S		\$2.6	6466		9,000	]	D	
Common Stock 10/12/2						2018				P		1,000	A \$		\$2.	.61		0,000	]	D	
	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)			n Date,	4. Transaction Code (Instr. 8)		n of Deri Secu Acqu (A) o Disp of (E	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Numbe of Title Shares		8. Pri Deriv Secu (Instr	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dir or I (I) (	nership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

**Explanation of Responses:** 

/s/ Timothy J. Sangiovanni,
Attorney-in-Fact for Gordon K. 10/12/2018
Johnson

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.