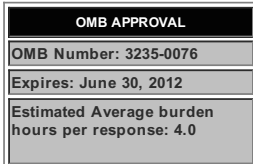


UNITED STATES SECURITIES
AND EXCHANGE COMMISSION
Washington, D.C.



1. Issuer's Identity

CIK (Filer ID Number) Previous Name(s) None Entity Type Corporation Limited Partnership Limited Liability Company General Partnership Business Trust Other

Name of Issuer

Jurisdiction of Incorporation/Organization

Year of Incorporation/Organization Over Five Years Ago Within Last Five Years (Specify Year) Yet to Be Formed

2. Principal Place of Business and Contact Information

Name of Issuer

Street Address 1 Street Address 2

City State/Province/Country ZIP/Postal Code Phone No. of Issuer

3. Related Persons

Last Name First Name Middle Name

Street Address 1 Street Address 2

City State/Province/Country ZIP/Postal Code

Relationship: Executive Officer Director Promoter

Clarification of Response (if Necessary)

Last Name First Name Middle Name

Street Address 1 Street Address 2

City State/Province/Country ZIP/Postal Code

Relationship:	<input checked="" type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> Promoter
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Clarification of Response (if Necessary)

Last Name	First Name	Middle Name
<input type="text" value="Johnson"/>	<input type="text" value="Todd"/>	<input type="text"/>

Street Address 1	Street Address 2
<input type="text" value="7 Hawkeye Drive"/>	<input type="text" value="Suite 103"/>

City	State/Province/Country	ZIP/Postal Code
<input type="text" value="North Liberty"/>	<input type="text" value="IA"/>	<input type="text" value="52317"/>

Relationship:	<input type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> Promoter
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Clarification of Response (if Necessary)

Last Name	First Name	Middle Name
<input type="text" value="Beardsley"/>	<input type="text" value="Robert"/>	<input type="text"/>

Street Address 1	Street Address 2
<input type="text" value="7 Hawkeye Drive"/>	<input type="text" value="Suite 103"/>

City	State/Province/Country	ZIP/Postal Code
<input type="text" value="North Liberty"/>	<input type="text" value="IA"/>	<input type="text" value="52317"/>

Relationship:	<input type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> Promoter
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Clarification of Response (if Necessary)

Last Name	First Name	Middle Name
<input type="text" value="Thompson"/>	<input type="text" value="Dan"/>	<input type="text"/>

Street Address 1	Street Address 2
<input type="text" value="7 Hawkeye Drive"/>	<input type="text" value="Suite 103"/>

City	State/Province/Country	ZIP/Postal Code
<input type="text" value="North Liberty"/>	<input type="text" value="IA"/>	<input type="text" value="52317"/>

Relationship:	<input type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> Promoter
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Clarification of Response (if Necessary)

Last Name	First Name	Middle Name
<input type="text" value="Karr"/>	<input type="text" value="Robert"/>	<input type="text"/>

Street Address 1	Street Address 2
<input type="text" value="7 Hawkeye Drive"/>	<input type="text" value="Suite 103"/>

City	State/Province/Country	ZIP/Postal Code
<input type="text" value="North Liberty"/>	<input type="text" value="IA"/>	<input type="text" value="52317"/>

Relationship:	<input checked="" type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> Promoter
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Clarification of Response (if Necessary)

Last Name	First Name	Middle Name
Claypool	Adam	

Street Address 1	Street Address 2
7 Hawkeye Drive	Suite 103

City	State/Province/Country	ZIP/Postal Code
North Liberty	IA	52317

Relationship:	<input type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> Promoter
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Clarification of Response (if Necessary)

4. Industry Group

<input type="radio"/> Agriculture	<input type="radio"/> Health Care	<input type="radio"/> Retailing
<input type="radio"/> Banking & Financial Services	<input type="radio"/> Biotechnology	<input type="radio"/> Restaurants
<input type="radio"/> Commercial Banking	<input type="radio"/> Health Insurance	<input type="radio"/> Technology
<input type="radio"/> Insurance	<input type="radio"/> Hospitals & Physicians	<input type="radio"/> Computers
<input type="radio"/> Investing	<input checked="" type="radio"/> Pharmaceuticals	<input type="radio"/> Telecommunications
<input type="radio"/> Investment Banking	<input type="radio"/> Other Health Care	<input type="radio"/> Other Technology
<input type="radio"/> Pooled Investment Fund		
<input type="radio"/> Other Banking & Financial Services	<input type="radio"/> Manufacturing	<input type="radio"/> Travel
<input type="radio"/> Business Services	<input type="radio"/> Real Estate	<input type="radio"/> Airlines & Airports
<input type="radio"/> Energy	<input type="radio"/> Commercial	<input type="radio"/> Lodging & Conventions
<input type="radio"/> Coal Mining	<input type="radio"/> Construction	<input type="radio"/> Tourism & Travel Services
<input type="radio"/> Electric Utilities	<input type="radio"/> REITS & Finance	<input type="radio"/> Other Travel
<input type="radio"/> Energy Conservation	<input type="radio"/> Residential	
<input type="radio"/> Environmental Services	<input type="radio"/> Other Real Estate	<input type="radio"/> Other
<input type="radio"/> Oil & Gas		
<input type="radio"/> Other Energy		

5. Issuer Size

Revenue Range	Aggregate Net Asset Value Range
<input type="radio"/> No Revenues	<input type="radio"/> No Aggregate Net Asset Value
<input type="radio"/> \$1 - \$1,000,000	<input type="radio"/> \$1 - \$5,000,000
<input type="radio"/> \$1,000,001 - \$5,000,000	<input type="radio"/> \$5,000,001 - \$25,000,000
<input type="radio"/> \$5,000,001 - \$25,000,000	<input type="radio"/> \$25,000,001 - \$50,000,000
<input type="radio"/> \$25,000,001 - \$100,000,000	<input type="radio"/> \$50,000,001 - \$100,000,000
<input type="radio"/> Over \$100,000,000	<input type="radio"/> Over \$100,000,000
<input checked="" type="radio"/> Decline to Disclose	<input type="radio"/> Decline to Disclose
<input type="radio"/> Not Applicable	<input type="radio"/> Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

- Rule 504(b)(1) (not (i), (ii) or (iii))
- Rule 504 (b)(1)(i)
- Rule 504 (b)(1)(ii)
- Rule 504 (b)(1)(iii)
- Rule 505
- Rule 506
- Securities Act Section 4(6)
- Investment Company Act Section 3(c)

7. Type of Filing

- New Notice Date of First Sale: First Sale Yet to Occur
- Amendment

8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes No

9. Type(s) of Securities Offered (select all that apply)

- Pooled Investment Fund Interests
- Tenant-in-Common Securities
- Mineral Property Securities
- Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security
- Equity
- Debt
- Option, Warrant or Other Right to Acquire Another Security
- Other (describe)

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer? Yes No

Clarification of Response (if Necessary)

11. Minimum Investment

Minimum investment accepted from any outside investor \$ USD

12. Sales Compensation

Recipient	Recipient CRD Number	<input type="checkbox"/> None
<input type="text" value="Adam Stone Claypool"/>	<input type="text" value="2572486"/>	
(Associated) Broker or Dealer	(Associated) Broker or Dealer CRD Number	<input type="checkbox"/> None
<input type="text" value="DeWay Financial Network, LLC"/>	<input type="text" value="30767"/>	
Street Address 1	Street Address 2	
<input type="text" value="13001 University Avenue"/>	<input type="text"/>	
City	State/Province/Country	ZIP/Postal Code
<input type="text" value="Clive"/>	<input type="text" value="IA"/>	<input type="text" value="50325"/>
State(s) of Solicitation	<input checked="" type="checkbox"/> All States <input type="checkbox"/> Foreign/Non-US	

13. Offering and Sales Amounts

Total Offering Amount \$ USD Indefinite

Total Amount Sold \$ USD

Total Remaining to be Sold \$ USD Indefinite

Clarification of Response (if Necessary)

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, Number of such non-accredited investors who already have invested in the offering

Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finders' Fees Expenses

Provide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$ USD Estimate

Finders' Fees \$ USD Estimate

Clarification of Response (if Necessary)

The maximum sales commission which may be payable is \$327,794, together with a warrant for class A common stock, the value of which cannot be determined at this time.

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$ USD Estimate

Clarification of Response (if Necessary)

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that the Issuer is not disqualified from relying on any Regulation D exemption it has identified in Item 6 above for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

All Issuers	Signature	Name of Signer	Title	Date
KemPharm, Inc.	/s/ Travis Mickle	Travis Mickle	President	2009-04-30