

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Statemen	Statement (Month/Day/		· ·							
				all applicable)	Filed(Mon	5. If Amendment, Date Original Filed(Month/Day/Year)				
			Officer (give titl	e Other (special below)	Applicable I _X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Beneficially Owned					wned				
	Ве	eneficially Ow	eficially Owned Form: Direct (Ins			Nature of Indirect Beneficial Ownership str. 5)				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02) 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 control number. Table II. Perivative Securities Reneficially Owned & a. puts calls warrants ontions convertible securities)										
and Expiration Date (Month/Day/Year) Bate Expiration Title Amou		Amount of nderlying Derivative nt or Number of	Derivative or Exercise Price of Derivative Security (D) Derivative Security (D) Output Derivative Security (D)		6. Nature of Indirect Beneficial Ownership (Instr. 5)					
ı:	statemen 04/16/2, , , , , , , , , , , , , , , , , , ,	ss of securities beneficial cond to the collection isplays a currently valuative Securities Beneficial 2. Date Expiration Date (Month/Day/Year) Date Expiration	Table I 2. Amount of Se Beneficially Ow (Instr. 4) ass of securities beneficially owned direction of to the collection of information isplays a currently valid OMB contitive Securities Beneficially Owned (e.g. and Expiration Date (Month/Day/Year) 2. Date Exercisable and Expiration Date (Month/Day/Year) 3. Title and A Securities Unstruction Security (Instr. 4) Date Expiration Title Amount Title Amount Title Amount Security (Instr. 4)	Statement (Month/Day/Year) 04/16/2021 4. Relationship of Issuer (Check X_Director Officer (give titl below) Table I - Non-Derivat 2. Amount of Securities Beneficially Owned (Instr. 4) ass of securities beneficially owned directly or indirectly. cond to the collection of information contained in tisplays a currently valid OMB control number. ative Securities Beneficially Owned (e.g., puts, calls, warr 2. Date Exercisable and Expiration Date (Month/Day/Year) 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Date Expiration Table I - Non-Derivate Amount or Number of Issuer (Check X_Director (Check X_Director Officer (give titl Delive I - Non-Derivate Securities 3. Amount of Number of Issuer 4. Relationship of Issuer (Check X_Director (Check X_Director Officer (give titl Delive I - Non-Derivate Securities Securities Amount of Number of Issuer Amount or Numbe	Statement (Month/Day/Year) 04/16/2021 MyMD Pharmaceuticals, Inc. 4. Relationship of Reporting Persor Issuer (Check all applicable) X_Director Other (specially Owned (give title below)) 10% Ownership Form: Direct (D) or Indirect (I) (Instr. 4) 10% Ownership Form: Direct (I) (Instr. 5) 10% Ownership Form: Direct (I) (Instr. 4) 10% Ownership Form: Direct (I) (I	Statement (Month/Day/Year) O4/16/2021 A. Relationship of Reporting Person(s) to Issuer (Check all applicable) A. Director				

Reporting Owners

	Relationships				
Reporting Owner Name / Address		10% Owner	Officer	Other	
EAGLE CRAIG 1185 AVENUE OF THE AMERICAS, 3RD FLOOR NEW YORK, NY 10036	X				

Signatures

/s/ Craig Eagle	04/21/2021
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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.

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