FORM	4
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Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

#### STATEMENT OF CHANGES IN 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

(Print or Type Responses)												
1. Name and Address of Ro EAGLE CRAIG	]	2. Issuer Name and MyMD Pharmac			<b>·</b> ·		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director 10% Owner					
(Last) 855 N. WOLFE STRI	<sup>(First)</sup> EET, SUITE 62	-	3. Date of Earliest Transaction (Month/Day/Year) 10/14/2021						Officer (give title below)Ot	her (specify belo	ow)	
(Street) BALTIMORE, MD 21205			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
DALTIMORE, MD 21205												
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if any	3. Transact Code (Instr. 8)		(A) or Disposed of (D)			Owned Following Reported Transaction(s)		Beneficial	
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	

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

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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)	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	tion	5. Number Derivative Securities Acquired ( or Dispose (D) (Instr. 3, 4, and 5)	A) d of	and Expirati (Month/Day	and Expiration Date of Underlying (Month/Day/Year) Securities		Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Exercisable	Expiration Date		Amount or Number of Shares		(11511. 1)	(1154: 1)	
Restricted Stock Units	<u>(1)</u>	10/14/2021		А		150,000		<u>(2)</u>	<u>(2)</u>	Common Stock	150,000	\$ 0	150,000	D	

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
EAGLE CRAIG 855 N. WOLFE STREET, SUITE 623 BALTIMORE, MD 21205	Х						

## Signatures

/s/ Craig Eagle	10/15/2021
**Signature of Reporting Person	Date

# **Explanation of Responses:**

\* 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).

(1) Each restricted stock unit ("RSU") represents a contingent right to receive one share of common stock of MyMD Pharmaceuticals, Inc. (the "Company").

The RSUs vest as follows: (i) 33% if the Company's market capitalization equals or exceeds \$500,000,000 for at least 10 trading days during any 20 consecutive trading day period ending on or after December 15, 2021 (the "Required Period") and the fair market value (the "FMV") of the common stock equals or exceeds \$5.00, subject to standard adjustments (the "Minimum Share Value") during such Required Period, (ii) 33% if the Company's market capitalization equals or exceeds \$750,000,000 for the Required Period at the Minimum Share Value; period at the Company's market capitalization equals or exceeds \$750,000,000 for the Required Period at the Minimum Share Value; provided that the RSUs shall vest immediately upon the occurrence of a change in control that values the Company's common stock at least \$500,000,000, provided that the Reporting Person is providing services to the Company on the closing date of such change in control.

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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