The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

OMB APPROVAL

OMB Number: 3235-0076
Estimated average burden
hours per response: 4.00

Notice of Exempt Offering of Securities

1. Issuer's Identity			
	Desidence	<u></u>	
CIK (Filer ID Number)	Previous Names	X None	Entity Type
0001853816			X Corporation
Name of Issuer			Limited Partnership
Dermata Therapeutics, Inc.		Limited Liability Company	
Jurisdiction of Incorporation/Organiz	zation	H	
DELAWARE			General Partnership
Year of Incorporation/Organization			Business Trust
Over Five Years Ago			Other (Specify)
Within Last Five Years (Specify	Year) 2021		
Yet to Be Formed			
2. Principal Place of Business and	Contact Information		
Name of Issuer			
Dermata Therapeutics, Inc.			
Street Address 1		Street Address 2	
3525 DEL MAR HEIGHTS RD., #322			
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
SAN DIEGO	CALIFORNIA	92130	(858) 800-2543
3. Related Persons			
Last Name	First Name		Middle Name
Proehl	Gerald		
Street Address 1	Street Address 2		
3525 DEL MAR HEIGHTS RD., #322			
City	State/Province/C	ountry	ZIP/PostalCode
San Diego	CALIFORNIA		92130
Relationship: X Executive Officer X	Director Promoter		
Clarification of Response (if Necess	ary):		
Last Name	First Name		Middle Name
Van Hoose	Kyri		K.
Street Address 1	Street Address 2		
3525 DEL MAR HEIGHTS RD., #322			
City	State/Province/C	ountry	ZIP/PostalCode
San Diego	CALIFORNIA		92130
Relationship: X Executive Officer	Director Promoter		
Clarification of Response (if Necess	ary):		
Last Name	First Name		Middle Name
Nardo	Christopher		J.
Street Address 1	Street Address 2		
3525 DEL MAR HEIGHTS RD., #322			
City	State/Province/C	ountry	ZIP/PostalCode
San Diego	CALIFORNIA		92130
Relationship: X Executive Officer	Director Promoter		
	. L		

Clarification of Response (if Necessary): First Name Middle Name Last Name Bedoya Toro Munera Maria Street Address 1 Street Address 2 3525 DEL MAR HEIGHTS RD., #322 State/Province/Country City ZIP/PostalCode **CALIFORNIA** 92130 San Diego Relationship: X Executive Officer | Director | Promoter Clarification of Response (if Necessary): First Name Middle Name Last Name Hale David Street Address 1 Street Address 2 3525 DEL MAR HEIGHTS RD., #322 City State/Province/Country ZIP/PostalCode **CALIFORNIA** San Diego 92130 Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary): Middle Name Last Name First Name Wierenga Wendell Street Address 2 Street Address 1 3525 DEL MAR HEIGHTS RD., #322 State/Province/Country ZIP/PostalCode San Diego **CALIFORNIA** 92130 Relationship: | Executive Officer X Director | Promoter Clarification of Response (if Necessary): First Name Middle Name Last Name Sandler Andrew Street Address 1 Street Address 2 3525 DEL MAR HEIGHTS RD., #322 City State/Province/Country ZIP/PostalCode San Diego **CALIFORNIA** 92130 Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary): Middle Name First Name Last Name Bradrick **Brittany** Street Address 1 Street Address 2 3525 DEL MAR HEIGHTS RD., #322 State/Province/Country ZIP/PostalCode **CALIFORNIA** 92130 San Diego Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary): Last Name First Name Middle Name Scott Kathleen Street Address 2 Street Address 1 3525 DEL MAR HEIGHTS RD., #322 City State/Province/Country ZIP/PostalCode **CALIFORNIA** 92130 San Diego Relationship: | Executive Officer X Director | Promoter Clarification of Response (if Necessary): Last Name First Name Middle Name Fisher Mary

Street Address 2

Street Address 1

3525 DEL MAR HEIGHTS RD., #322		
City	State/Province/Country	ZIP/PostalCode
San Diego	CALIFORNIA	92130
Relationship: Executive Officer Director	Promoter	
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Mento	Steven	J.
Street Address 1	Street Address 2	
3525 DEL MAR HEIGHTS RD., #322 City	State/Province/Country	ZIP/PostalCode
San Diego	CALIFORNIA	92130
Relationship: Executive Officer X Director	Promoter	
Clarification of Response (if Necessary):	_	
4. Industry Group		
Agriculture	Health Care	Detailing.
Banking & Financial Services	Biotechnology	☐ Retailing
Commercial Banking		Restaurants
Insurance	Health Insurance	Technology
Investing	Hospitals & Physicians	Computers
Investment Banking	Pharmaceuticals	Telecommunications
Pooled Investment Fund	Other Health Care	X Other Technology
	, <u> </u>	Travel
Is the issuer registered as an investment company under	Manufacturing	Airlines & Airports
the Investment Company Act of 1940?	Real Estate	
∏Yes ∏No	Commercial	Lodging & Conventions
	Construction	Tourism & Travel Services
Other Banking & Financial Services	REITS & Finance	Other Travel
Business Services	Residential	Other
Energy		
Coal Mining	Other Real Estate	
Electric Utilities		
Energy Conservation		
Environmental Services		
— ∏Oil & Gas		
Other Energy		
5. Issuer Size		
Revenue Range OR		Asset Value Range
No Revenues	H	e Net Asset Value
\$1 - \$1,000,000	\$1 - \$5,000,00	00
\$1,000,001 - \$5,000,000	\$5,000,001 - \$	
\$5,000,001 - \$25,000,000	\$25,000,001 -	\$50,000,000
\$25,000,001 - \$100,000,000	\$50,000,001 -	- \$100,000,000
Over \$100,000,000	Over \$100,00	0,000
X Decline to Disclose	Decline to Dis	sclose
Not Applicable	Not Applicable	в
6. Federal Exemption(s) and Exclusion(s) C	— Claimed (select all that appl	ly)

	Investment Company Act Section 3(c)	
	Section 3(c)(1) Section 3	B(c)(9)
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(2) Section 3	
Rule 504 (b)(1)(i)		
Rule 504 (b)(1)(ii)	Section 3(c)(3)	3(c)(11)
Rule 504 (b)(1)(iii) X Rule 506(b)	Section 3(c)(4)	8(c)(12)
Rule 506(c)	Section 3(c)(5)	3(c)(13)
Securities Act Section 4(a)(5)	Section 3(c)(6)	B(c)(14)
	Section 3(c)(7)	
7. Type of Filing		
	/	
X New Notice Date of First Sale 2024-09-17 First Sale	ret to Occur	
Amendment		
8. Duration of Offering		
Does the Issuer intend this offering to last more than one ye	ear? Yes X No	
9. Type(s) of Securities Offered (select all that apply)		
Equity	Pooled Investment Fu	and Interests
Debt	Tenant-in-Common S	ecurities
X Option, Warrant or Other Right to Acquire Another Secur	ity Mineral Property Sec	urities
Security to be Acquired Upon Exercise of Option, Warrar	t or Other Right to Other (describe)	
Acquire Security	Ш	
10. Business Combination Transaction		
Is this offering being made in connection with a business co or exchange offer?	mbination transaction, such as a merger, acq	uisition Yes X No
of exchange offer:		
Clarification of Response (if Necessary):		
•		
Clarification of Response (if Necessary):) USD	
Clarification of Response (if Necessary): 11. Minimum Investment) USD	
Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$(12. Sales Compensation		
Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$(12. Sales Compensation Recipient	Recipient CRD Number None	
Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$(12. Sales Compensation	Recipient CRD Number None	
Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$6 12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None	Recipient CRD Number None	
Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$6 12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None Street Address 1	Recipient CRD Number None 000000375 (Associated) Broker or Dealer C	
Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$(12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None Street Address 1 430 PARK AVENUE	Recipient CRD Number None 000000375 (Associated) Broker or Dealer C None Street Address 2 4TH FLOOR	RD Number X None
Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$6 12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None Street Address 1	Recipient CRD Number None 000000375 (Associated) Broker or Dealer C	
Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$(12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None Street Address 1 430 PARK AVENUE City	Recipient CRD Number None 000000375 (Associated) Broker or Dealer C None Street Address 2 4TH FLOOR State/Province/Country	RD Number X None ZIP/Postal Code
Clarification of Response (if Necessary): 11. Minimum Investment Minimum investment accepted from any outside investor \$(12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None Street Address 1 430 PARK AVENUE City New York	Recipient CRD Number None 000000375 (Associated) Broker or Dealer Conne Street Address 2 4TH FLOOR State/Province/Country NEW YORK	RD Number X None ZIP/Postal Code
Clarification of Response (if Necessary): 11. Minimum Investment Minimum Investment accepted from any outside investor \$(12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None Street Address 1 430 PARK AVENUE City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual States 13. Offering and Sales Amounts	Recipient CRD Number None 000000375 (Associated) Broker or Dealer Conone Street Address 2 4TH FLOOR State/Province/Country NEW YORK Foreign/non-US	RD Number X None ZIP/Postal Code
Clarification of Response (if Necessary): 11. Minimum Investment Minimum Investment accepted from any outside investor \$6 12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None Street Address 1 430 PARK AVENUE City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual States 13. Offering and Sales Amounts Total Offering Amount \$3,498,089 USD or Indefinite	Recipient CRD Number None 000000375 (Associated) Broker or Dealer Conone Street Address 2 4TH FLOOR State/Province/Country NEW YORK Foreign/non-US	RD Number X None ZIP/Postal Code
Clarification of Response (if Necessary): 11. Minimum Investment Minimum Investment accepted from any outside investor \$0 12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None Street Address 1 430 PARK AVENUE City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual States 13. Offering and Sales Amounts Total Offering Amount \$3,498,089 USD or Indefinite Total Amount Sold \$3,498,089 USD	Recipient CRD Number None 000000375 (Associated) Broker or Dealer Conone Street Address 2 4TH FLOOR State/Province/Country NEW YORK Foreign/non-US	RD Number X None ZIP/Postal Code
Clarification of Response (if Necessary): 11. Minimum Investment Minimum Investment accepted from any outside investor \$6 12. Sales Compensation Recipient H.C. Wainwright & Co., LLC (Associated) Broker or Dealer X None None Street Address 1 430 PARK AVENUE City New York State(s) of Solicitation (select all that apply) Check "All States" or check individual States 13. Offering and Sales Amounts Total Offering Amount \$3,498,089 USD or Indefinite	Recipient CRD Number None 000000375 (Associated) Broker or Dealer Conone Street Address 2 4TH FLOOR State/Province/Country NEW YORK Foreign/non-US	RD Number X None ZIP/Postal Code

_	nave been or may be sold to persons who do not qualify as accredited investors, and enter the number of o already have invested in the offering.
total number of investors who alre	n the offering have been or may be sold to persons who do not qualify as accredited investors, enter the ady have invested in the offering:
15. Sales Commissions & Finder's	-ees Expenses
Provide separately the amounts of sal check the box next to the amount.	es commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and
Sales Commissions \$3	345,000 USD X Estimate
Finders' Fees	\$0 USD Estimate
Clarification of Response (if Necessar	y):
Includes a cash fee received of \$245,000, stock.	\$35,000 (management fees), \$25,000 (non-accountable expense), \$40,000 (legal) and warrants to purchase 133,880 shares of common

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.

\$0 USD X Estimate

Clarification of Response (if Necessary):

Some of the proceeds may be used for working capital and general corporate purposes, including the payment of salaries and other fees to those listed in Item 3.

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, in the
 accordance with applicable law, 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 the issuer 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, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

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.

Issuer	Signature	Name of Signer	Title	Date
Dermata Therapeutics, Inc.		Gerald Proehl	Chief Executive Office	2024-09-27

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.