#### FORM 4

(Print or Type Responses)

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

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### 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

Name and Address of Reporting Person –  FISHER MARY				2. Issuer Name and Ticker or Trading Symbol Dermata Therapeutics, Inc. [DRMA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 3525 DEL MAR HEIGHTS RD., #332			3. Date of Earliest Transaction (Month/Day/Year) 01/03/2022								ve title below)			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)				
, CA 92	2130													
	(State)	(Zip)			Т	able	I - Non-Deri	vative Securition	es Acquired	, Disposed	of, or Bend	eficially Owne	d	
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year		any		Date, if	(Instr. 8)		A) or Disposed instr. 3, 4 and 5	of (D) Own Trai (Ins	Transaction(s) (Instr. 3 and 4)		ed C F D o: (I	orm: Be or or Indirect (In )	eneficial wnership	
rt on a se	•	Γable II - Deriv	ative S	Secu	ırities	Acq	Person contain form d	s who responded in this for splays a curreposed of, or	rm are not rently valid Beneficia	required OMB co lly Own	to respond ntrol numl	d unless the	SEC 14	74 (9-02)
1	3 Transaction	<u> </u>	puts, ca	alls,					1		8 Price of	9 Number of	10	11. Natur
version I	Date	Execution Date, if any	Transaction of Code E (Instr. 8) S (Instr. 8) C (Instr. 8		of Deriva Securi Acquii (A) or Dispos of (D) (Instr.	ative ties red sed 3, 4,	Expiration Date (Month/Day/Year)		of Underlying Securities (Instr. 3 and 4)		Derivative Security	Derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect	
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
	01/03/2022		A		5,000	)	(1)	01/02/2032	Common	5,000	\$ 0	5,000	D	
t v x e v	AR HE	(Street) AR HEIGHTS RD., #3 (Street) ACA 92130 (State)  To a separate line for each service of vative (Month/Day/Year)	(First) (Middle)  AR HEIGHTS RD., #332  (Street)  (CA 92130  (State) (Zip)  2. Transaction Date (Month/Day/Year)  t on a separate line for each class of securities  Table II - Deriv (e.g., and the content of the cont	AR HEIGHTS RD., #332  (Street)  (Street)  (State)  (State)  (State)  (State)  (State)  (Zip)  2. Transaction Date (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (e.g., puts, c.g.)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Instr. 8)	AR HEIGHTS RD., #332  (Street)  (Street)  (State)  (State)  (State)  (State)  (State)  (Zip)  2A. Deemed Execution Date (Month/Day/Year) any (Month/Day  (Month/Day  Table II - Derivative Sect (e.g., puts, calls any (Month/Day/Year))  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  3A. Deemed Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Instr. 8)	AR HEIGHTS RD., #332  (Street)  (Street)  (State)  (Zip)  (State)  (Zip)  (State)  (Zip)  (State)  (Zip)  (Month/Day/Year)  2. Transaction Date (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  Table II - Derivative Securities beneficially owned defect (e.g., puts, calls, warr (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (e.g., puts, calls, warr (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (Instr. 8)  (Month/Day/Year)  3. Transaction Date (Instr. 8)  (Month/Day/Year)  (Month/Day/Year)	AR HEIGHTS RD., #332  (Street)  (Street)  (State)  (State)  (Zip)  (State)  (Zip)  (State)  (Zip)  (State)  (State)  (Zip)  (A. Deemed Execution Date, if (Month/Day/Year)  (Month/Day/Year)	Dermata Therapeutics, Inc. [DR  (First) (Middle) AR HEIGHTS RD., #332  (Street)  4. If Amendment, Date Original Filed(M  (CA 92130  (State) (Zip)  Table I - Non-Derive Execution Date, if (any (Month/Day/Year))  (Month/Day/Year)  t on a separate line for each class of securities beneficially owned directly or indirectly or	Dermata Therapeutics, Inc. [DRMA]  AR HEIGHTS RD., #332  (Street)  4. If Amendment, Date Original Filed(Month/Day/Year)  (CA 92130  (State)  2. Transaction Date (Month/Day/Year)  2. Transaction Date (Month/Day/Year)  (Month/Day/Year)  2. Transaction Date (Month/Day/Year)  2. Transaction Date (Month/Day/Year)  (Month/Day/Year)  2. Transaction Date (Instr. 8)  (A) or Disposed (Instr. 8)  (Instr. 3, 4 and 5)  Table II - Derivative Securities Acquired, Disposed of, or (e.g., puts, calls, warrants, options, convertible (Month/Day/Year)  3. Transaction Date (Instr. 8)  3. Transaction Date (Instr. 8)  (Month/Day/Year)  3. Transaction Date (Instr. 8)  (Month/Day/Year)  3. Transaction Date (Instr. 8)  4. Securities Acquired, Disposed of, or (e.g., puts, calls, warrants, options, convertible (Month/Day/Year)  3. Transaction Date (Instr. 8)  3. Transaction Date (Instr. 8)  3. Transaction Date (Instr. 8)  4. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  4. Date Exercisable Expiration Date (Month/Day/Year)  4. Date Exercisable Expiration Date (Month/Day/Year)	Dermata Therapeutics, Inc. [DRMA]   X   X   X   X   X   X   X   X   X	Dermata Therapeutics, Inc. [DRMA]   AR HEIGHTS RD., #332   3. Date of Earliest Transaction (Month/Day/Year)   O1/03/2022     4. If Amendment, Date Original Filed(Month/Day/Year)   O1/03/2022     4. If Amendment, Date Original Filed(Month/Day/Year)   O1/03/2022     O1/03/2022     O1/03/2022   O1/03/202	Dermata Therapeutics, Inc. [DRMA]   Check	Check all applicate   Check all applicate	Check all applicable   Check all applicable

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
FISHER MARY 3525 DEL MAR HEIGHTS RD., #332 SAN DIEGO, CA 92130	X						

### **Signatures**

/s/ Gerald T. Proehl, Attorney-in-Fact	01/05/2022
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) The option vests in twelve equal monthly installments commencing January 3, 2022.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.