FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	S IN BENEFICIA	<b>AL OWNERSHIP</b>

1	OMB APPRO	JVAL
	OMB Number:	3235-0287
	Estimated average burd	en
	hours per response:	0.5

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

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

1. Name and Address of Reporting Person* <u>Gonyer David A</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol  Evoke Pharma Inc [ EVOK ]									tionship of all applica Director	able)	g Perso	on(s) to Issu			
(Last) (First) (Middle) C/O EVOKE PHARMA, INC. 420 STEVENS AVENUE, SUITE 370			,		3. Date of Earliest Transaction (Month/Day/Year) 01/25/2017								X	X Officer (give title below) Other (specify below)  President and CEO					
(Street)  SOLANA BEACH  (City)  (State)  4. If Amendment, Date of Original Filed (Month/Day/						ay/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											
		Ta	ble I - Non-D	erivati	ve Se	ecurities	s Ac	quired,	Dis	osed c	of, or B	eneficia	ally C	Owned					
Date				action 2A. Deemed Execution Date if any (Month/Day/Ye		Date,	e, Transaction Disposed Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 an		nd 5) Securities Beneficia Owned Fo		For Ily (D) (I) (I) (I) (I) (I) (I)	Form: (D) or	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D) Pric		e	Reported Transaction(s) (Instr. 3 and 4)				nstr. 4)	
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		S	B. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amoun or Number of Shar	r		Transaction(s) (Instr. 4)				
Stock Option (Right to Buy)	\$2.36	01/25/2017		A		225,000		(1)	0	1/24/2027	Commor Stock	225,00	00	\$0.00	225,0	00	D		

## Explanation of Responses:

1. The total number of shares of common stock subject to the option vests in 48 equal monthly installments over the four-year period beginning on January 1, 2017, subject to the reporting person's continued service to the Issuer through each such vesting date.

## Remarks:

/s/ Matthew J. D'Onofrio, Attorney-in-fact for David A.

01/27/2017

Date

**Gonyer** 

\*\* Signature of Reporting Person

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

- $^{\star}$  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).

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

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.