

Washington, D.C. 20549

OMB APPROVAL						
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longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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 Ty	pe Response	es)																
1. Name and Address of Reporting Person *- Praill Scott					2. Issuer Name and Ticker or Trading Symbol DelMar Pharmaceuticals, Inc. [DMPI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) SUITE 720-999 WEST BROADWAY (Street)					Date of Earliest Transaction (Month/Day/Year) 04/29/2016 If Amendment, Date Original Filed(Month/Day/Year)								X Officer (give title below) Other (specify below) Chief Financial Officer 6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person					
				4.														
VANCOU	JVER, A1	V5Z 1K5										_			e Reporting Perso	n		
(City	<i>i</i>)	(State)	(Zip)				Tabl	le I - I	Non-Der	ivativ	e Securitio	es Acquir	ed, Dispose	ed of, or Bei	neficially Ow	ned		
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Yo	ear) E	A. Deem execution ny Month/D	Date	e, if C			(A) ((A) or	1 of (D) B 5) R (I	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) [Instr. 3 and 4)			Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder:	Report on a s	separate line for ea		I - De	erivative	Secu	urities	Acqu	Perso conta form	ons vained	vho respo	orm are n rrently va	ot require	on of informed to respondent	ond unless		1474 (9-02)	
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date, in any (Month/Day/Yea		f Transaction Code I (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		isable and te	7. Title a Amount Underlyi Securitie (Instr. 3	of ng s	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	ve Ownershi (Instr. 4) D)	
					Code	V	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares					
Series B Preferred Stock	<u>(1)</u>	04/29/2016			P(2)		3,750)	04/29/2	2016	<u>(3)</u>	Commo	137,500	\$ 8	3,750	D		
Repor	ting O	wners																
Reporting Owner Name / Address			Relationships															
		Traine / Audi ess	Director	10%	Owner	Offic	cer			C	ther							
Praill Scott SUITE 720-999 WEST BROADWAY VANCOUVER, A1 V5Z 1K5			Chief Financial (al Offic	er										

Signatures

/s/ Scott Praill	05/02/2016
**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).
- The Series B Preferred stock is convertible into such number of shares of common stock equal to the number of Preferred Shares to be converted, multiplied by the Stated Value of (1) \$8.00, divided by the Conversion Price in effect at the time of the conversion (the initial Conversion Price will be \$0.80, subject to adjustment in the event of stock splits, stock dividends, and similar transactions).
- (2) The Reporting Person purchased Series B Preferred Stock from the Company in a private placement on April 29, 2016 (the "Private Placement").
 - The Series B Preferred Stock will automatically convert to common stock at the earlier of (a) the Company's lead product candidate, VAL-083, receiving Food and Drug
- (3) Administration or European Medicines Agency approval (provided that, at the time of such approval, the closing bid price of the common stock is at least \$2.00 (subject to adjustment for stock splits or stock dividends) or (b) five years from the final closing of the Private Placement.

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 of	OMB number.