FORM 4

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

OMB APPR	OVAL					
OMB Number:	3235-0287					
Estimated average burden						
ours per response						

Check this box if no 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

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 Re	esponses)																	
1. Name and Address of Reporting Person * Cranston Lynda Sarah				2. Issuer Name and Ticker or Trading Symbol DelMar Pharmaceuticals, Inc. [DMPI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner								
(Last) (First) (Middle) SUITE 720-999 WEST BROADWAY					3. Date of Earliest Transaction (Month/Day/Year) 06/28/2019								Officer	r (give title belo	ow)	Othe	er (specif	y below)
(Street) VANCOUVER, A1 V5Z 1K5				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City) (State) (Zip)					Table I - Non-Derivative Securities Acqui							quire	uired, Disposed of, or Beneficially Owned						
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	any	xecution Date, if		saction (8)	` /		ities Acquired risposed of (D) 4 and 5)		Beneficially		nt of Securities Illy Owned Following Transaction(s) nd 4)					icial rship	
						Code	e V	7 A	Amount	(A) or (D)	Price					(I)			7)
Common Sto	ock		06/28/2019			J ⁽¹⁾		8	3	A	\$ 0	300	300 (2)			I		Held J.G. Cran & Asso Inc.	
Reminder: Repo	ort on a so	eparate line f	for each class of secu Table II -	Derivative			Pe	erso onta ie fo	ons wh ained ii orm dis	no responding this formal series of the seri	orm a a cur	are n rentl	ot requ y valid	ction of inf ired to res OMB cont	spond u	nless	SE	C 147	4 (9-02)
(Instr. 3) Price	e of ivative	3. Transaction Date (Month/Day)	Execution D	ate, if Tran	saction	5.	6 ar (I) tive ies ed ed ed 3,	6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		Title mour Inderliecurit instr.	Title and 8. Pri Deriv Securities extr. 3 and		9. Numb Derivati Securitie Benefici Owned Followin Reported Transact (Instr. 4)	ive es Formially Der Sec Direct or Internal (I)		ership on of Broative C	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Coo	de V	(A)	_	Oate Exerc		Expirati Date	on T	itle N	Amount or Number of Shares						

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Cranston Lynda Sarah SUITE 720-999 WEST BROADWAY VANCOUVER, A1 V5Z 1K5	X						

Signatures

/s/ Anthony Scott Praill, attorney-in-fact for Lynda Sarah Cranston	07/01/2019
**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 shares were issued as dividends on the reporting person's shares of Series B Preferred Stock.
- (2) On May 8, 2019, the issuer effected a 1-for-10 reverse stock split of its common stock (the "Reverse Stock Split"). The amount of securities reported on this Form 4 have been adjusted to reflect the Reverse Stock Split.

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.