FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
l	Estimated average burd	en				
l	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*  WIDDER KENNETH J							2. Issuer Name <b>and</b> Ticker or Trading Symbol Evoke Pharma Inc [ EVOK ]									of Reportin cable) or (give title	g Pers	son(s) to Iss 10% Ov Other (s	ner
(Last) (First) (Middle) C/O EVOKE PHARMA, INC. 505 LOMAS SANTA FE DRIVE, SUITE 270							3. Date of Earliest Transaction (Month/Day/Year) 05/20/2014									(give title		below)	респу
(Street) SOLANA BEACH	A CA	A !	92075			4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check A Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person										orting Perso	n		
(City)	(St		(Zip)																
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					action	ction 2A. Deemed Execution Date,			3. Trans	action (Instr.	4. Securi	ities Acquired (A) o		nd	5. Amou Securitie Beneficia	nt of es Formally (I)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership Instr. 4)
		Т	able II - I									, or Ben ble secu			wned				
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. Transactio Code (Insti				6. Date Exercisable at Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (In	. Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to Buy)	\$7.2	05/20/2014			A		9,000		(1)	C	5/19/2024	Common Stock	9,000		\$0.00	9,000		D	

## **Explanation of Responses:**

1. The total number of shares of common stock subject to the option vests on the one-year anniversary of the date of grant (5/20/2014), subject to the reporting person's continued service to the Issuer through such vesting date.

## Remarks:

/s/ Matthew J. D'Onofrio, Attorney-in-fact for Kenneth J. 05/22/2014 Widder

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.