FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

			or Sec	tion 30(h) of	the Investment Company A	ct of 194	40				
1. Name and Address of Reporting Person* Nantahala Capital Management, LLC			2. Date of Requiring (Month/Da 11/06/20	Statement ay/Year)	3. Issuer Name and Ticker or Trading Symbol Evoke Pharma Inc [EVOK]						
(Last) (First) (Middle)			_		4. Relationship of Reporting Issuer (Check all applicable) Director					5. If Amendment, Date of Original Filed (Month/Day/Year)	
130 MAIN ST. 2ND FLOOR (Street)			_		Officer (give title below)	Ot	ther (spelow)		6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person		
NEW CANAAN	CT	06840	_						V	- Carro filad l	by More than One Person
(City)	(State)	(Zip)									
		•	Гable I - No	n-Derivat	ive Securities Benef	ficially	Ow	ned			
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr 4)	3. Owner Form: Di (D) or Inc (I) (Instr.		Direct Own		Nature of Indirect Beneficial vnership (Instr. 5)	
Common Stock					148,194		I	I See		e footnote ⁽¹⁾	
		(e.			e Securities Benefic ints, options, convei	•)		
'` '			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)			4. Conversion or Exercise		5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.
			Date Exercisable	Expiration Date	Title	Amou or Numb of Share	oer	Price o Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)	5)
Pre-Funded Warrants			02/13/2024	02/13/2029	Common Stock	433,9	962	0.0001		I	See footnote ⁽¹⁾
Series A Common Stock Purchase Warrants		02/13/2024	02/13/2029	Common Stock	117,0	019	8.16		I	See footnote ⁽¹⁾	
Series B Common Stock Purchase Warrants		02/13/2024	11/13/2029	Common Stock	245,0	080	8.16		I	See footnote ⁽¹⁾	
Series C Common Stock Purchase Warrants		02/13/2029	02/13/2029	Common Stock	117,0	17,019 8.1		6	I	See footnote ⁽¹⁾	
Amended Series A Common Stock Purchase Warrants		09/27/2024	02/13/2029	Common Stock	158,6	682 0.01		1	I	See footnote ⁽¹⁾	
Amended Series C Common Stock Purchase Warrants		09/27/2024	02/13/2029	Common Stock	250,6	527	0.0	1	I	See footnote ⁽¹⁾	
I	Address of Repo a Capital M (First)	<u>lanageme</u>	nt, LLC								

130 MAIN ST. 2ND FLOOR (Street) NEW CT06840 **CANAAN** (State) (City) (Zip)

1. Name and Add <u>Harkey Wil</u>		g Person [*]						
(Last) (First) (Middle) C/O NANTAHALA CAPITAL MANAGEMENT, LLC 130 MAIN ST. 2ND FLOOR								
(Street) NEW CANAAN	СТ	06840						
(City) (State) (Zip) 1. Name and Address of Reporting Person*								
Mack Danie	<u>el</u>							
(Last)	(First)	(Middle)						
C/O NANTAHALA CAPITAL MANAGEMENT, LLC 130 MAIN ST. 2ND FLOOR								
(Street) NEW CANAAN	СТ	06840						
(City)	(State)	(Zip)						

Explanation of Responses:

1. Nantahala Capital Management, LLC ("NCM"), an investment adviser to certain private funds and managed accounts (the "NCM Investors") that hold the Evoke Pharma, Inc. ("Issuer") securities disclosed in this statement, may be deemed a beneficial owner of such securities. Each of Mr. Wilmot B. Harkey and Mr. Daniel Mack may be deemed a beneficial owner of Issuer securities beneficially owned by NCM. Each of NCM, Mr. Harkey and Mr. Mack disclaims beneficial ownership of the Issuer's securities disclosed herein except to the extent of their respective pecuniary interests therein.

/s/ Taki Vasilakis, Chief
Compliance Officer,
Nantahala Capital
Management, LLC
/s/ Wilmot B. Harkey
/s/ Daniel Mack
** Signature of Reporting
Person

11/15/2024

11/15/2024

Date

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

- * If the form is filed by more than one reporting person, see Instruction 5 (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.