FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
-------------	------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:	0.5								

Instruc	tion 1(b).			Filed	pursual or Se	nt to S ction 3	ection 16(a) 80(h) of the Ir	of the Soverthee	ecurit nt Co	ies Exchang mpany Act o	e Act of 1 f 1940	934		lioui	=====	эропэс.	0.5
1. Name and Address of Reporting Person* <u>Gonyer David A</u>					2. Issuer Name and Ticker or Trading Symbol Evoke Pharma Inc [EVOK]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
	(Last) (First) (Middle) C/O EVOKE PHARMA, INC. 420 STEVENS AVENUE, SUITE 370					3. Date of Earliest Transaction (Month/Day/Year) 09/01/2020							X Officer (give title Other (specify below) President and CEO				
(Street) SOLANA BEACH (City)	C.F		2075 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table	I - Nor	n-Deriva	tive S	ecur	ities Acq	uired,	Dis	posed of	, or Be	nefic	ially Ow	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (I 5)					nd Sec Ben Owr	nount of Irities eficially ed Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock			09/01/2	2020		J		20,238	A	\$1.	05	5 339,782		D			
		Tal					ies Acqu varrants,							ed			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date (Month/Day/Year) if any		on Date,	Transaction of		6. Date Exercisable and Expiration Date (Month/Day/Year)			Amount of Securities		8. Price of Derivative Security (Instr. 5) 8. Price of Derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)		e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)		

Date

Exercisable

(A) (D)

Explanation of Responses:

Remarks:

/s/ Matthew J. D'Onofrio,

Amount or Number

Shares

09/02/2020 Attorney-in-fact for David A.

<u>Gonyer</u>

Title

Expiration Date

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).