## FORM 4

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

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden					
ours per response	e 0.5				

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 Ty	pe Response	es)													
Name and Address of Reporting Person * Parsons James T.				2. Issuer Name and Ticker or Trading Symbol DiaMedica Therapeutics Inc. [DMAC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 2 CARLSON PARKWAY, SUITE 260				3. Date of Earliest Transaction (Month/Day/Year) 12/11/2018								r (give title belo		Other (specify b	elow)
(Street) MINNEAPOLIS, MN 55447				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)		Tal	ble I - N	n-De	rivative	Securities	Acqu	ired, Dispo	osed of, or l	Beneficially	Owned	
1.Title of S (Instr. 3)	Instr. 3) Da		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		f Code (Instr. 8)		(A) or (D)	(A) or Disposed of		ed 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
						Cod	e ,	V Amou	(A) or (D)	Price	(I)			(Instr. 4)	
Voting Covalue per		ares, no par	12/11/2018			P		2,250	A	\$ 4	6,100 (1	)		D	
Reminder: indirectly.	Report on a	separate line fo	or each class of secu	rities bene	ficially	owned d	Pe	rsons w ntained	in this fo	rm ar	e not req	uired to re	nformation espond unl	ess	EC 1474 (9- 02)
			Table II - D	erivative S								l			
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Y	n 3A. Deemed Execution Da any	4. Transaction Code Year) (Instr. 8)		of		f 6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Am Und Sec	Fitle and abount of derlying urities str. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	)
								ate cercisable	Expiratio	n Titl	Amount or e Number				

### **Reporting Owners**

Describer Occurs Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Parsons James T. 2 CARLSON PARKWAY SUITE 260 MINNEAPOLIS, MN 55447	X						

### **Signatures**

/s/ Amy Culbert, attorney-in-fact	12/11/2018
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) Includes 3,850 voting common shares issuable upon settlement of deferred share units granted under the DiaMedica Therapeutics Inc. Deferred Share Unit Plan.

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.

