### FORM 4

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

| OMB APPR            | OVAL      |
|---------------------|-----------|
| OMB Number:         | 3235-0287 |
| Estimated average   | burden    |
| 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).

#### 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   | s)   |   |  |            |  |  |                           |                 |   |  |   |                |  |   |   |   |  |
|--|---------------|--|---|--|------------|--|--|---------------------------|-----------------|---|--|---|----------------|--|---|---|---|--|
| 1. Name and Address of Reporting Person* Giuffre Randall Michael |               |  |   | 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) 06/01/2022                    |            |  |  |                           |                 |   |  | Officer (give   | e title below) | Of                                     | her (specify b                                      | low)  |   |  |
| (Street)   |               |  |   | 4. If Amendment, Date Original Filed(Month/Day/Year)                           |            |  |  |                           |                 |   | _X_ Fo   | 6. Individual or Joint/Group Filing(Check Applicable Line)  _X_Form filed by One Reporting Person  Form filed by More than One Reporting Person |                |  |   |   |   |  |
|  | APOLIS, N     |  |   |  |            |  |  |                           |                 |   |  |   |                |  |   |   |   |  |
| (Cit   | y)            | (State)                                      | (Zip)   |  |            | 1  | able I   | - No                      | n-Der           | ivative S                                       | Securitie  | s Acqu  | uired, I       | Disposed                               | of, or Bene   | ficially Own  | ıed   |  |
| 1.Title of Security (Instr. 3)                                   |               | 2. Transaction<br>Date<br>(Month/Day/Year)   | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) |  | (Instr. 8) |  | 4. Securities Acc<br>(A) or Disposed<br>(Instr. 3, 4 and 5 |                           |                 | of (D)  | Owne<br>Trans  | 5. Amount of Securities Beneficially<br>Owned Following Reported<br>Transaction(s)<br>(Instr. 3 and 4)  |                |  | Form:   | 7. Nature<br>of Indirec<br>Beneficial<br>Ownershi   |   |  |
|  |               |  |   | (inomal Bay) Tour  |            | <b>J</b> ,   | Co   | de                        | V               | Amount  | (A) or<br>(D)  | Price   |                |  |   |   | t (Instr. 4)  |  |
| Voting C<br>value per  |               | hares, no par                                |   |  |            |  |  |                           |                 |   |  |   | 110,           | 225 (1)                                |   |   | D   |  |
| Voting C<br>value per  |               | hares, no par                                |   |  |            |  |  |                           |                 |   |  |   | 25,5           | 73                                     |   |   | I   | (2) (2)                                  |
| Voting Coulombre value per                                       |               | hares, no par                                |   |  |            |  |  |                           |                 |   |  |   | 21,0           | 70                                     |   |   | I   | By<br>Spouse                             |
| Voting Common Shares, no par value per share                     |               |  |   |  |            |  |  |                           |                 |   | 54,186   |   |                | I                                      | By<br>Children                                      |   |   |  |
| Reminder:  | Report on a s | separate line for each                       | n class of securities b                                     | beneficia  | lly o      | owned di   | irectly  | F                         | Perso<br>n this | ns who<br>form a                                | re not re  | equire  | ed to r        |  | unless the  | tion contai   | ned SE  | C 1474 (9-02                             |
|  |               |  | Table II -  |  |            |  |  |                           |                 |   | or Bene<br>de secur  |   | y Own          | ed                                     |   |   |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)              | Conversion    | Exercise (Month/Day/Year) any ce of rivative |   | 4.<br>Transaction<br>Code<br>(Instr. 8)  |            | 5. Number of Derivative Securities Acquired (A or Disposed of (D) (Instr. 3, 4, and 5) |  | es (Mont<br>d (A)<br>osed |                 | e Exercisable and<br>ation Date<br>th/Day/Year) |  | of Un<br>Secur  | derlyin        | Č                                      | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction | Owner<br>Form of<br>Deriva<br>Securit<br>Direct<br>or Indi<br>(s) | of Beneficative Owner (Instr. (D) irrect |
|  |               |  |   | Code   | V          | (A)  | (D)  |                           | e<br>rcisab     | Expiration<br>e Date                            |  | Title   |                | Amount<br>or<br>Number<br>of<br>Shares |   | (Instr. 4)  | (Instr.   | 7)                                       |
| Stock<br>Option<br>(right to<br>buy)                             | \$ 2.45       | 06/01/2022                                   |   | A  |            | 13,22  | 2  |                           | (3)             | 05/3  | 1/2032   |   | nmon           | 13,222                                 | \$ 0  | 13,222  | D   |  |
| (right to buy)   | \$ 2.45       |  |   | A  |            | 13,22  | 2  |                           | (3)             | 05/3  | 1/2032   |   |                | 13,222                                 | \$ 0  | 13,222  | D   |  |

## Signatures

SUITE 260

Reporting Owner Name /

Address

MINNEAPOLIS, MN 55447

Giuffre Randall Michael 2 CARLSON PARKWAY

| /s/ Amy Culbert, attorney-in-fact | 06/02/2022 |
|-----------------------------------|------------|
|                                   |            |

Relationships

Other

Officer

10%

Owner

Director

X

| **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).
- Includes 4,146 voting common shares issuable upon settlement of deferred share units granted under the DiaMedica Therapeutics Inc. Deferred Share Unit Plan, 29,829 shares issuable (1) upon settlement of deferred stock units granted under the DiaMedica Therapeutics Inc. 2019 Omnibus Incentive Plan, 14,890 voting common shares held by Michael Giuffre and his wife jointly and 61,360 voting common shares held by Michael Giuffre individually.
- (2) These voting common shares are held by 424822 Albert Ltd, of which Michael Giuffre has sole voting and dispositive power.
- (3) Vests in four nearly equal quarterly installments over one year.

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.