Instruction 1(b).

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 |
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| |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>Martin John Richard</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol Deciphera Pharmaceuticals, Inc. [DCPH] | | | | | | | of Reporting able) r | g Pers | on(s) to Issu 10% Ow | |
|---|---|---------------------|--|-----------------------------------|---|---|------|--|--------------------|---|--|---|--|---|--|--|
| (Last) (First) (Middle) C/O DECIPHERA PHARMACEUTICALS, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/17/2018 | | | | | | | Officer below) | (give title | | Other (s below) | pecify |
| 500 TOTTEN POND ROAD | | | | | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) WALTHAM MA 02451 | | | 02451 | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | |
| | | Tab | le I - Non-D | erivativ | e Se | curities | s Ac | quired, Di | sposed o | f, or Be | neficial | y Owned | | | | |
| Date | | | | Transaction ate lonth/Day/Y | Execution Da | | | e, Transaction Disposed Code (Instr. 5) | | ities Acquired (A) or d Of (D) (Instr. 3, 4 and | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code V | Amount | (A) or (D) | Price | Transact (Instr. 3 a | ion(s) | | | misti. 4) |
| | | - | Fable II - De (e.ç | | | | | uired, Dis , options, | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | se (Month/Day/Year) | 3A. Deemed Execution Date if any (Month/Day/Yea | Code | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Option (Right to Buy) | \$25.73 | 05/17/2018 | | A | | 12,000 | | (1) | 05/16/2028 | Common Stock | 12,000 | \$0.00 | 12,000 |) | D | |

Explanation of Responses:

1. This stock option award was issued pursuant to Issuer's 2017 Stock Option and Incentive Plan and will vest in full on May 17, 2019, subject to the Reporting Person's continuous service with the Issuer.

Remarks:

/s/ Amanda Stastny, Attorney-

in-Fact

** Signature of Reporting Person

Date

05/21/2018

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 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.