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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

## OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

hours per response:	0.5
Estimated average burden	

1. Name and Addre Taylor Micha	ss of Reporting Personel Contemporation Reported Personel Reported Personal Report of the Report Personal Report Personal Report Persona Contemporation Report Personal Report Personal Report Personal Report Personal Report Personal Report Personal Re	on*	2. Issuer Name <b>and</b> Ticker or Trading Symbol Deciphera Pharmaceuticals, Inc. [ DCPH ]		ationship of Reporting Per ( all applicable) Director	son(s) to Issuer 10% Owner	
	(First) RA PHARMACEU	(Middle) JTICALS, INC.	3. Date of Earliest Transaction (Month/Day/Year) 11/01/2019		Officer (give title below)	Other (specify below)	
200 SMITH ST	REET		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Group Filing (Check Applicable		
(Street)				X	Form filed by One Rep	orting Person	
WALTHAM	MA	02451			Form filed by More tha Person	n One Reporting	
(City)	(State)	(Zip)					

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	Form: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	ount (A) or (D) Price		Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	11/01/2019		М		7,500	A	\$1.89	7,500	D	
Common Stock	11/01/2019		S <sup>(1)</sup>		7,500	D	\$45.0194(2)	0	D	

 

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		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)	\$1.89	11/01/2019		М			7,500	(3)	12/17/2025	Common Stock	7,500	\$0.00	479,635	D	

Explanation of Responses:

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$45.00 to \$45.20, inclusive. The reporting person undertakes to provide to Deciphera Pharmaceuticals, Inc., any security holder of Deciphera Pharmaceuticals, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

3. This stock option award was issued pursuant to Deciphera Pharmaceuticals, LLC's 2015 Equity Incentive Plan. The option vests in 16 equal quarterly installments at the end of each quarter following the vesting commencement date of March 1, 2014, subject to continued service through such dates.

Remarks:

<u>/s/ Thomas P. Kelly, Attorney-</u> <u>in-Fact</u>

11/05/2019

\*\* Signature of Reporting Person 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 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.