FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

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 | STATEMENT OF CHANGES IN BENEFICIAL |
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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

| Name and Address of Reporting Person* Martin John Richard | | | | | 2. Issuer Name and Ticker or Trading Symbol Deciphera Pharmaceuticals, Inc. [DCPH] | | | | | | | | | all applic | able) r | g Pers | son(s) to Iss 10% Ov | vner |
|---|--|------------|------------------------|--------------------------------------|---|---------------------------------------|--|--------------------|-----------------|--|-----------------|--|---|--|-----------------------|--|--|---|
| | CIPHERA I | PHARMACEUT | (Middle) TCALS, INC | 06 | 3. Date of Earliest Transaction (Month/Day/Year) 06/11/2019 Officer (give title below) Other (specify below) | | | | | | | | | | specify | | | |
| 500 TOTTEN POND ROAD | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) WALTH | AM M | ÍΑ | 02451 | | | | | | | | | | X | | led by One | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tab | le I - Non-D | Perivativ | e Se | curities | s Ac | quired, I | Dis | posed o | f, or Be | nefici | ally (| Owned | | | | |
| Date | | | | Transaction ate lonth/Day/Y | Execution Date, | | | Code (Instr. 5) | | | | ed (A) oi tr. 3, 4 a | or 5. Amou 4 and Securitie Beneficie Owned F | | s ally ollowing | Form (D) o | Ownership orm: Direct O) or Indirect () (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | Code | v | Amount | (A) or (D) P | | e | Transact (Instr. 3 a | tion(s) | | | (111301. 4) | | |
| | 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) | or Exercise (Month/Day/Year) if any | | Code | ransaction of ode (Instr. Derivative | | ive ies ed ed ed nstr. | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4) | | Derivative Security | | 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 Exercisabl | | Expiration Date | Title | Amour or Number of Shares | er | | | | | |
| Stock Option (Right to Buy) | \$21.05 | 06/11/2019 | | A | | 12,000 | | (1) | (| 06/11/2029 | Common Stock | 12,00 | 0 | \$0.00 | 12,000 | 0 | D | |

Explanation of Responses:

1. This stock option was issued pursuant to the Issuer's 2017 Stock Option and Incentive Plan. The option shall vest in full on June 11, 2020, subject to continued service through such date.

Remarks:

/s/ Thomas P. Kelly, Attorney-06/13/2019 in-Fact

OWNERSHIP

** 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.