

OMB APPROVAL	
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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

1. Name and Address of Reporting Person* <u>Laliberte Kevin</u> (Last) (First) (Middle) C/O DOVA PHARMACEUTICALS, INC. 240 LEIGH FARM ROAD, SUITE 245 (Street) DURHAM NC 27707 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Dova Pharmaceuticals, Inc. [DOVA]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Sr. VP, Product Development</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>11/06/2017</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

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. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)	
					(A)	(D)	Date Exercisable	Expiration Date						Title
Employee Stock Option (Right to Buy)	\$3.73 ⁽¹⁾	11/06/2017		A	24,750		(2)	03/27/2027	Common Stock	24,750	\$0.00	24,750	D	

Explanation of Responses:

- The Reporting Person was granted a stock option on March 28, 2017 (the "Date of Grant") providing for milestone vesting based on the Issuer's successful completion of two Phase IIIB/IV clinical trial protocols as determined and certified in writing by the Board of Directors (the "Board"). Such milestone was achieved on September 29, 2017 and certified by the Board on November 6, 2017. The exercise price of the option is the fair market value of the Issuer's Common Stock on the Date of Grant.
- The option shall vest over a period of four years as follows: (i) 25% of the total shares subject to the option shall vest on September 29, 2018, and (ii) the balance of the shares shall vest in a series of thirty-six (36) successive equal monthly installments beginning on October 29, 2018, subject to the Person's continuous service with the Issuer as of each such date. In addition, the option allows for early exercise, subject to the Issuer's repurchase option, with respect to any unvested shares of Common Stock.

Remarks:

/s/ Jason Saxe, Attorney-in-Fact 11/08/2017

** 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.