FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL									
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bligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									34		hour	s per re	sponse:	0.5			
Name and Address of Reporting Person* Cobuzzi Robert Joseph Jr.					2. Issuer Name and Ticker or Trading Symbol Diffusion Pharmaceuticals Inc. [DFFN]						(Ch	Relationship of eck all applications of the contractions of the co	cable) or	Ü	10% Ov	ner	
(Last) 300 E. M.	(Fir AIN ST. SU	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/18/2022						X Officer (give title below) Other (specify below) President & CEO				pecify		
(Street) CHARLO	OTTESVILI (Sta	· 	22902 Zip)	4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				۱		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			ansaction th/Day/Year	Execution Date, Transaction Disposed Of (D) (Instr. 3				4 and Securities Beneficially Owned Follo		Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
					Code V Amount (A) or P				Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any		Code (li	tion of Der Sec (A) Dis of (oosed D) tr. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		4) Amount	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporter Transact (Instr. 4)	ve es ally ig d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
												Number					

Explanation of Responses:

\$0.5

Series C Convertible

Preferred Stock⁽¹⁾

1. On March 18, 2022, the Reporting Person purchased 5,000 shares of Series C Convertible Preferred Stock, par value \$0.001 per share (the "Shares"), from the Issuer at a purchase price of \$0.50 per Share in a private placement. The Shares have no voting rights, other than (i) each Share will be counted on an as converted basis, together with the Issuer's common stock as a single class, for purposes of determining the presence of a quorum at any meeting of the Issuer's stockholders at which a proposal related to a reverse stock split of the Issuer's common stock (a "Reverse Stock Split") will be voted upon, (ii) each Share is entitled to 80,000 votes on matters related to a Reverse Stock Split, provided that such votes must be cast For and Against each proposal on a "mirrored" basis proportional to the vote of the Issuer's common stockholders, and (iii) the right to vote as a class on certain specified matters directly related to the preferences, rights, and limitations of the Shares.

Date

(D) Exercisable

(1)

Expiration Date

(1)

Title

Stock

/s/ William R. Elder, attorney-03/22/2022 in-fact for the Reporting Person

** Signature of Reporting Person Date

of Shares

5,000

\$0.5

5.000

D

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).

03/18/2022

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code ν (A)

5,000

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.