## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average bu	urden
hours ner response	0.5

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 OF SECURITIES

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

(Print or Ty														
Name and Address of Reporting Person * Freeman Roy Lester				2. Issuer Name and Ticker or Trading Symbol Inhibikase Therapeutics, Inc. [IKT]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director 10% Owner				
(Last) (First) (Middle) 3350 RIVERWOOD PARKWAY SE, SUITE 1900				3. Date of Earliest Transaction (Month/Day/Year) 12/22/2020						Officer (give	e title below)	Othe	r (specify below	)
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person				)	
ATLANTA, GA 30339 (City) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially O							a				
1.Title of Security 2. (Instr. 3) Da		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date,		3. T	ransaction 4. Securities Acq		uired 5. Amount of Owned Follow		Securities Beneficially ving Reported		5. 7 Ownership c	7. Nature of Indirect Beneficial	
				(Month/Day			Code V A	(A) or (D)	Price (In:	str. 3 and 4)		(	Direct (D) (or Indirect (I) (Instr. 4)	Ownership
Reminder:								s who respon					eu sec i	474 (9-02)
Reminder:			Table II				in this display	form are not res a currently	equired to valid OME	o respond B control n	unless the		eu SECT	474 (9-02)
1. Title of	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	ts, calls, 5. N tion of Der Sect Acq (A) Disp of (I	warran umber vative arities uired or bosed O) cr. 3, 4,	in this display coquired, Display 6. Date Exer Expiration D (Month/Day/	form are not rest a currently osed of, or Benonvertible secures is able and ate	equired to valid OME eficially Overtities)	o respond B control n wned nd Amount lying	unless the number.		f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	11. Naturip of Indire Benefici Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	tion of Der Secondary (A) Dispose of (I (Ins	warran umber vative uired or oosed O) rr. 3, 4, 5)	in this display  coquired, Display  6. Date Exere Expiration D (Month/Day/	form are not rest a currently osed of, or Benonvertible secures is able and ate	equired to valid OME eficially Overities)  7. Title and of Underly Securities	o respond B control n wned nd Amount lying	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirects)	11. Naturip of Indire Benefici Ownersi (Instr. 4)

### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Freeman Roy Lester 3350 RIVERWOOD PARKWAY SE, SUITE 1900 ATLANTA, GA 30339	X				

### **Signatures**

/s/ Milton H. Werner, attorney-in-fact	12/29/2020
**Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.