1. Name and Address of Reporting Person*  
DUNTON ALAN W  
(Last) (First) (Middle)  
PALATIN TECHNOLOGIES, INC.  
4B CEDAR BROOK DRIVE  
(City) (State) (Zip)  

2. Issuer Name and Ticker or Trading Symbol  
PALATIN TECHNOLOGIES INC [ PTN ]  

5. Relationship of Reporting Person(s) to Issuer  
(X) Director  
10% Owner  
Officer (give title below)  
Other (specify below)  

3. Date of Earliest Transaction (Month/Day/Year)  
11/15/2018  

4. If Amendment, Date of 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  

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

<table>
<thead>
<tr>
<th>Security</th>
<th>Date</th>
<th>Transaction Code</th>
<th>Amount</th>
<th>Price</th>
<th>Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>11/15/2018</td>
<td>P</td>
<td>332</td>
<td>$0.8</td>
<td>412,351 D</td>
</tr>
<tr>
<td>Common Stock</td>
<td>11/16/2018</td>
<td>P</td>
<td>5,000</td>
<td>$0.78</td>
<td>417,351 D</td>
</tr>
<tr>
<td>Common Stock</td>
<td>11/16/2018</td>
<td>P</td>
<td>4,000</td>
<td>$0.7671</td>
<td>421,351 D</td>
</tr>
<tr>
<td>Common Stock</td>
<td>11/16/2018</td>
<td>P</td>
<td>1,000</td>
<td>$0.8</td>
<td>422,351 D</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Security</th>
<th>Date</th>
<th>Transaction Code</th>
<th>Amount</th>
<th>Price</th>
<th>Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
</tr>
</thead>
</table>

Explanation of Responses:  
/s/ Alan W. Dunton, by  
Stephen A. Slusher, Attorney-in-Fact  
11/19/2018  

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).  
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.