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

OMB APPROVAL						
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hours per response	0.5					

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	ype Response	s)															
1. Name and Address of Reporting Person* Drake Patricia M.				2. Issuer Name and Ticker or Trading Symbol TREVENA INC [TRVN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O TREVENA, INC., 955 CHESTERBROOK BLVD., SUITE 110				3. Date of Earliest Transaction (Month/Day/Year) 11/10/2021						X	X Officer (give title below) Other (specify below) SVP, Chief Commercial Officer						
(Street) CHESTERBROOK, PA 19087				4. If Amendment, Date Original Filed(Month/Day/Year)							_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year			Code (Instr.	(.		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		C(D) Ov Tra	5. Amount of Securities Beneficia Owned Following Reported Transaction(s)			Ownership Form:	Beneficial		
				(Month/Day/Year)		Coe	de			(A) or (D)		Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Commo	Common Stock 11/10/2021		11/10/2021			A	A		15,000	A	\$ 0 21	215,000			D		
			Table II		ntive Securit		a uired	currer , Dispo	ntly valid sed of, or	OMB Benefi	control r	umber.		form displa	,,,,		
-		 	•		uts, calls, w								1				
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	any	or Disp (D)		tive ies ed (A)	Expi (Mor	6. Date Exercisable ar Expiration Date (Month/Day/Year)		7. Title of Unde Securiti (Instr. 3		J		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(Ownersl Form of Derivati Security Direct (I or Indirects)	Beneficia Ownershi (Instr. 4)	
	Derivative Security				(D) (Instr. 3							_		Following Reported Transaction	Direct (s) (I)	(Instr. 4)	
				Code	(D) (Instr. 3		Date Exer	cisable	Expiration Date	on ,	Title	Amount or Number of Shares		Following Reported	Direct ((Instr. 4)	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	irector 10% Officer		Other			
Drake Patricia M. C/O TREVENA, INC. 955 CHESTERBROOK BLVD., SUITE 110 CHESTERBROOK, PA 19087			SVP, Chief Commercial Officer				

Signatures

/s/ Jennifer Keyser, as Attorney-in-Fact	11/12/2021
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).

- These shares are represented by restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of common stock of the Issuer. The shares underlying the RSUs (1) shall vest in four (4) equal annual installments on each of November 10, 2022, November 10, 2023, November 10, 2024 and November 10, 2025, subject to the Reporting Person's Continuous Service (as defined in the Issuer's 2013 Equity Incentive Plan, as amended (the "Plan")) as of each such vesting date.
- (2) The option shall vest and become exercisable with respect to one-sixteenth of the total number of shares subject to the option on a quarterly basis (every three) months from the Transaction Date listed above, subject to the Reporting Person's Continuous Service (as defined in the Plan) as of each such vesting date.

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.