1. Name and Address of Reporting Person*  
Hyun Grace  
(First) (Last) (Middle)  
48 NW 25TH STREET, SUITE 102  
(Street) MIAMI FL 33127  
(City) (State) (Zip)

2. Date of Event Requiring Statement (Month/Day/Year)  
08/11/2020

3. Issuer Name and Ticker or Trading Symbol  
VERU INC. [ VERU ]

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

5. If Amendment, Date of Original Filed (Month/Day/Year)

6. Individual or Joint/Group Filing  
(X) Form filed by One Reporting Person  
Form filed by More than One Reporting Person

<table>
<thead>
<tr>
<th>Table I - Non-Derivative Securities Beneficially Owned</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Title of Security (Instr. 4)</td>
</tr>
<tr>
<td>---------------------------------</td>
</tr>
<tr>
<td>Common Stock</td>
</tr>
</tbody>
</table>

| Table II - Derivative Securities Beneficially Owned  
(e.g., puts, calls, warrants, options, convertible securities) |
|-------------------------------------------------------------|
| 1. Title of Derivative Security (Instr. 4)  
2. Date Exercisable and Expiration Date (Month/Day/Year)  
3. Title and Amount or Number of Shares Underlying Derivative Security (Instr. 4)  
4. Conversion or Exercise Price of Derivative Security  
5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)  
6. Nature of Indirect Beneficial Ownership (Instr. 5) |
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Date Exercisable</td>
<td>Expiration Date</td>
<td>Title</td>
<td>Amount of Shares</td>
</tr>
</tbody>
</table>

Explanations of Responses:  
/s/ Phil Greenberg, via Power of Attorney  
08/12/2020

** 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 5 (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.