FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

l	UMB APPRO	JVAL
	OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations 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

1. Name and Address of Reporting Person* Rosen Howard B						2. Issuer Name and Ticker or Trading Symbol ACELRX PHARMACEUTICALS INC ACRX									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Rosell Howard B				AC										X	Directo	r		10% Ov	vner	
(Last)	(Fi	rst)	(Middle)				J									Officer below)	(give title		Other (s below)	pecify
C/O ACI	ELRX PHA	RMACEUTICA	LS. INC.		3. [3. Date of Earliest Transaction (Month/Day/Year)														
351 GALVESTON DRIVE				06	06/25/2019															
331 GAI	LVESTON	DKIVE																		
(Street)					4. I	If Ame	endment,	Date	of Orig	inal File	ed (Mon	th/Da	ıy/Year)		6. Indi Line)	vidual or J	oint/Group	Filing	(Check App	olicable
REDWC	NOD.														X	Form fi	led by One	Renc	orting Persor	,
CITY	C.	A	94063												Λ		,	•	J	
CITI																Person		e man	One Repor	urig
(City)	(S	tate)	(Zip)																	
	`																			
		Tab	le I - No	n-Deri	vativ	e Se	curitie	s Ac	cquir	∍d, Di	spose	ed o	f, or Be	nefic	ially	Owned				
1. Title of	Security (Inst	tr. 3)		2. Trans	saction				3.				ties Acquir							7. Nature
Date (Month/I			/Day/Ye	Execution Day/Year) if any		ution Date,		Transaction Disposed Code (Instr. 5)		Of (D) (Ins	tr. 3, 4	and	Securitie Benefici	ally (D		rm: Direct or Indirect	of Indirect Beneficial			
						(Month/Day/Year		ar) 8)	r) 8) `					Owne Repo		ollowing	(I) (In		Ownership (Instr. 4)	
								Co	ode V	Amo	ount	(A) o (D)	r Pri	ce	Transact	Transaction(s) (Instr. 3 and 4)			`,	
Common	Stock ⁽¹⁾			06/2	25/201	5/2019			A	3,	3,750 ⁽²⁾ A		\$	0.00	0 61,250 ⁽³⁾			D		
					_		_													
			Γable ΙΙ -										or Ben ble secu			owned				
1. Title of	2.	3. Transaction	3A. Deeme	d	4.		5. Nun	her	6. Date	Exerci	sable an	nd	7. Title an	ıd		3. Price of	9. Number	r of	10.	11. Nature
Derivative	Conversion	Date (Month/Day/Year)	Execution if any (Month/Day	Date,	Transa		of	Ex		Expiration Date Amount of				of	1	Derivative	derivative		Ownership	of Indirect
Security (Instr. 3)	or Exercise Price of				Code (8)	Instr.	str. Derivative Securities Acquired (A) or		(Month/Day/Year)				Securities Underlyin	g	- 10	Security Instr. 5)	Securities Beneficially		Direct (D)	Beneficial Ownership
	Derivative Security								Derivative Secu (Instr. 3 and 4)						ırity		Owned Following	.	or Indirect ((Instr. 4)
	Security						Disposed		(11150. 3 and 4)					u .,			Reported		(1) (111301. 4)	
					of (D) (Instr.		of (D) (Instr. 3, 4									Transaction(s) (Instr. 4)				
						and 5)										ļ				
							1							Amo	unt					
														or Num	ber					
					Code	v	(A)		Date Exerci	sable	Expira Date	Expiration Date	Title	of Shar	es					
Stock																				1
Option (Right to	\$2.19	06/25/2019			A		7,500		07/25/	2019 ⁽⁴⁾	06/25/2	2029	Common Stock	7,5	00	\$0.00	7,500		D	

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.
- 2. The restricted stock units shall vest in two equal consecutive annual installments on June 25, 2020 and June 25, 2021, subject to Reporting Person's continuous service to the Company.
- $3. \ Balance includes non-reportable acquisition of 7,500 \ shares of Common Stock through the Company's Employee Stock Purchase Plan.$
- 4. The shares subject to the option vest as follows: 1/24th of the shares subject to the option vest in equal monthly installments over 24 months, subject to Reporting Person's continuous service to the Company.

Remarks:

/s/ Martha Adler, Attorney-In-

06/25/2019

Fact

** 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 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.

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.