FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16/a) of the Securities Exchange Act of 1934

				i licu							mpany Act o			334					
Name and Address of Reporting Person* Skyline Venture Partners Qualified Purchaser Fund IV L P			<u>AC</u>	2. Issuer Name and Ticker or Trading Symbol ACELRX PHARMACEUTICALS INC [ACRX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title V Other (specify						
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 03/07/2014									below) Former 10% Holder						
C/O SKYLINE PARTNERS 525 UNIVERSITY AVENUE				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person						
(Street) PALO ALTO CA 94301																			
(City)	(St	ate) (Ž	Zip)																
		Tabl	el-	Non-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed of	, or	Ben	eficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Trans Date			2. Transacti Date (Month/Day/	Execution		ecution [iny	ate,	3. Transaction Code (Instr. 8)		4. Securities A Disposed Of (D and 5)		Acquired (A) or (D) (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A	() or ()	Price	Report Transa		(Ins	itr. 4)	(Instr. 4)
Common Stock 03			03/07/20)14	14			J ⁽¹⁾		1,300,00	0 D \$0		2,871,933			I	See footnote ⁽²⁾		
		Та	ble I	l - Derivat (e.g., pı							osed of, convertible				y Owned	I			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) if any (Month/Day/Year) if any (Month/Day/Year)		ution Date,		Transaction Code (Instr.				6. Date Exerci Expiration Da (Month/Day/Y		ate Amor Year) Secu Unde Deriv		Fitle and 8 ount of curities Ederlying Sirvative surity (Instr.		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D or Indire (I) (Instr.		Beneficial Ownership
					Code		V (A)	(D)	Date Exercis	able	Expiration Date	Title	or Nu of	nount mber ares					
	<u>e Venture</u>	f Reporting Person Partners Q		ied Purc	hase	e <u>r</u>							•						
	LINE PAR' VERSITY A		1)	Middle)															
(Street) PALO ALTO CA 943		4301																	
(City) (State) (Zip)		Zip)																	

	ss of Reporting Perso	
(Last)	(First)	(Middle)
C/O SKYLINE P	ARTNERS	
525 UNIVERSIT	TY AVENUE	
(Street)		
PALO ALTO	CA	94301
(City)	(State)	(Zip)
1. Name and Addre	ss of Reporting Person Gordon	on [*]
(Last)	(First)	(Middle)
C/O SKYLINE P	ARTNERS	
525 UNIVERSIT	TY AVENUE	
(Street)		
PALO ALTO	CA	94301
(City)	(State)	(Zip)
1. Name and Addre	ss of Reporting Person	on*
(Last)	(First)	(Middle)
C/O SKYLINE P	ARTNERS	
525 UNIVERSIT	TY AVENUE	
(Street)		
PALO ALTO	CA	94301
(City)	(State)	(Zip)

Explanation of Responses:

- 1. Represents a pro-rata in-kind distribution by Skyline Venture Partners Qualified Purchaser Fund IV, L.P. ("SVP IV") without consideration to its limited and general partners.
- 2. The shares are held by SVP IV. John G. Freund, M.D. and Yasunori Kaneko, M.D. are the Managing Members of Skyline Venture Management IV, LLC, the general partner of SVP IV, and may be deemed to share voting and dispositive power over the shares held by SVP IV. Stephen Hoffman, M.D., Ph.D., one of the Issuer's directors, is a member of Skyline Venture Management IV, LLC and may be deemed to share voting and dispositive power with respect to the shares of Common Stock held by SVP IV. Each of Drs. Freund and Kaneko disclaims beneficial ownership of such shares, except to the extent of his pecuniary interest therein. Stephen Hoffman is a director of the Issuer and, accordingly, files separate Section 16 reports.

/s/ Karensa Kenny as attorneyin-fact Skyline Venture
Partners Qualified Purchaser
Fund IV, L.P
/s/ Karensa Kenny as attorneyin-fact Skyline Venture
Management IV, LLC
/s/ Karensa Kenny as attorneyin-fact John G. Freund
/s/ Karensa Kenny as attorneyin-fact Yasunori Kaneko
** 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.