## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person <sup>*</sup> <u>Rosen Howard B</u>						2. Issuer Name and Ticker or Trading Symbol <u>ACELRX PHARMACEUTICALS INC</u> [ ACRX ]										all appl Directe	p of Reporting F blicable) tor er (give title		10% C	Owner
(Last) (First) (Middle) C/O ACELRX PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 05/13/2016									Х	below	()	EO	Other (specify below)		
351 GALVESTON DRIVE					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) REDWOOD CA 94063														X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						Execution Date,			3. Transaction Code (Instr. 8) 4. Securit Disposed and 5)							cially		ct (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		A) or D)	Price	!	Reported Transaction(s) (Instr. 3 and 4)				(
Common Stock 05/13/20					.016	016			Р		10,20	6	Α	\$3.26		50	50,000		D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Executi rity or Exercise (Month/Day/Year) if any		on Date, Transacti Code (Ins Day/Year) 8)					6. Date E Expiratio (Month/D Date Exercisat	ear) Expiration	Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amoun or Numbh		str. ount nber	1 1		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		nership rm: rect (D) Indirect (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

/s/ Martha Adler, Attorney-in-05/16/2016

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.