FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Instruc	tion 1(b).			Filed							es Exchang npany Act o		1934			Liouis		. эропэс.	0.5
Name and Address of Reporting Person* Angotti Vincent J.			2. Issuer Name and Ticker or Trading Symbol ACELRX PHARMACEUTICALS INC ACRX									5. Relationship of Reporting Person(s) to Issu (Check all applicable) X Director 10% Owner					wner		
(Last) (First) (Middle)														X Officer (give title below)			Other (specify below)		
C/O ACELRX PHARMACEUTICALS, INC.				C.	3. Date of Earliest Transaction (Month/Day/Year) 03/03/2023									Chief Executive Officer					
25821 IN	NDUSTRIA	L BLVD., SUIT	E 400		03/0	3/202	<u> </u>												
					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) HAYWA	.RD CA	<u>م</u>	4545										-	X Form filed by One Reporting Person					
,															Form filed by More than One Reporting Person				
(City)	(St	ate) (Z	Zip)												1 0130	,,,,			
		Table	I - Non	n-Deriva	tive S	Secui	ities	Acq	uired,	Dis	posed of	, or Be	nefic	ially (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Exec (ay/Year) if any		A. Deemed kecution Date, any lonth/Day/Year)				es Acquired (A Of (D) (Instr. 3,		ind S	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 (D)	Price	. 1	Reporte Transac (Instr. 3	eu ction(s) 8 and 4)			(Instr. 4)
Common	Stock			03/03/2	2023				F		1,703(1)	D	\$1.	\$1.31 63,836 D			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)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year) if any (Month/Day/Year		on Date,	Transaction Code (Instr. 8) Sc. A.A. (A.D.i) of (Ir are		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed	6. Date Exerc Expiration Da (Month/Day/Y		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares		-		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. Represents shares surrendered to the Issuer by the Reporting Person to pay required tax withholdings due to the vesting of RSUs.

Remarks:

/s/ Martha Adler, Attorney-In-Fact

03/06/2023

** 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.