FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL						
OMB Number:	3235-0287						
Expires:	December 31, 2014						
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).

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				ACE	2. Issuer Name and Ticker or Trading Symbol ACELRX PHARMACEUTICALS INC [ ACRX ]									neck a	ionship of Reporting all applicable)  Director		10	% Ow	vner	
, , , , , , , , , , , , , , , , , , , ,					3. Date of Earliest Transaction (Month/Day/Year) 05/19/2015									X	Officer (give title below)  Intermin		be	her (s low)	specify	
351 GALVESTON DRIVE				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)					pplicable	
(Street) REDWO	OD CA	Λ 9	4063														ed by More	Reporting than One		
(City)	(Sta	ate) (Z	<b>Z</b> ip)																	
		Tabl	e I - N	on-Deriv	ative S	ecu	ıritie	s Acq	uired, D	isp	osed of	f, or	Bene	ficia	lly O	wned	l			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired Disposed Of (D) (Instr and 5)				S E	Securities Seneficially Owned		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount		(A) or (D) Prid		Repo					(mau. <del>4</del> )
Common Stock 05/19/20				2015		P		35,40	0	A	(1)		39,	794	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)	rivative Conversion Date Execution curity or Exercise (Month/Day/Year) if any							6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)			8. Prio of Deriva Securi (Instr.	de ative Se ity Be . 5) Ov Fo Re	Number o erivative ecurities eneficially wned ollowing eported ransaction nstr. 4)	Owners Form: Direct ( or Indi (I) (Inst 4)	hip c E D) C ect (	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	or Nun of Sha							

## Explanation of Responses:

1. These shares were bought in multiple transactions at prices ranging from \$3.27 to \$3.36, inclusive. The reporting person undertakes to provide to Acelrx Pharmaceuticals, Inc., or the staff of the Securities and Exchange Comission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

## Remarks:

/s/ Martha Adler, Attorney-in-Fact 05/20/2015

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.