FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
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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* <u>ASADORIAN RAFFI</u>					AC	2. Issuer Name and Ticker or Trading Symbol ACELRX PHARMACEUTICALS INC ACRX										all app			Owner
(1 +)	/F:-		N 41-11-N												X	belov	er (give title v)	Otne belov	(specify
(Last) (First) (Middle) C/O ACELRX PHARMACEUTICALS, INC. 351 GALVESTON DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 11/13/2018									Chief Financial Officer					
(Street) REDWOOD CITY City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indivi ine) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
	<u> </u>	Tabl	e I - No	n-Deriv	tivo	Sac	uritic	Α.c.	nuired	Die	posed o	f or	Ron	ofici	ally ()wnc			
			e i - NO			_			.	, DIS									1
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,		Date,	Transaction Disposed O Code (Instr.			ies Acquired (A) o Of (D) (Instr. 3, 4			and 5) Secu Bene Owne		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (D	A) or D)	Price			ted action(s) 3 and 4)		(Instr. 4)
Common Stock 11/13/2				2018		P		5,000 A		A	\$3.1	1292		7,000	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Executio	n Date,	4. Transaction Code (Instr. 8)		ı of		6. Date I Expiration (Month/I		Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3		vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of	mber ares					

Explanation of Responses:

Remarks:

/s/ Martha Adler, Attorney-In-

Fact

** Signature of Reporting Person

Date

11/13/2018

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.