## Edgar Filing: MORRA BRUCE S - Form 4

MORRA BR	UCE S										
Form 4											
January 06, 2											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB AF OMB Number:	PROVAL 3235-0287			
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er <b>STATE</b> 5. Filed pu <sup>s</sup> Section 17	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Expires:January 3Expires:200Estimated averageburden hours perresponse0.		
(Print or Type R	esponses)										
MORRA BRUCE S Syml			Symbol		Ticker or Ti	-		5. Relationship of Reporting Person(s) to Issuer			
(Least)	SCOLR Pharma, Inc. [DDD] 3. Date of Earliest Transaction					(Check all applicable)					
(Month				Day/Year)				XDirector10% Owner Officer (give titleOther (specify below)below)			
				endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
BOTHELL, WA 98011							Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Se	ecuriti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	) Execution any	ned	3.	4. Securitie n(A) or Disp (Instr. 3, 4 Amount	es Acq oosed o	uired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock	01/04/2010			А	214,285		\$0	214,285	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	7. Title Amoun Underly Securiti (Instr. 3	it of ying ies	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	o Title N o	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
MORRA BRUCE S C/O SCOLR PHARMA, INC. 19204 N. CREEK PARKWAY, #100 BOTHELL, WA 98011	Х					
Signatures						
/s/ Richard M. Levy, Attorney-in-fact f	for Bruce	S.				
Morra			01/06/2	2010		
<u>**</u> Signature of Reporting Person			Da	te		
Explanation of Respon	nses:					

## \* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.