## Edgar Filing: ACELRX PHARMACEUTICALS INC - Form 4

<b>CORIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB	PROVAL 3235-0287			
Check this box Expires January	/ 31, 2005 0.5			
(Print or Type Responses)				
1. Name and Address of Reporting Person* ADAMS ADRIAN2. Issuer Name and Ticker or Trading Symbol5. Relationship of Reporting Person(s) to IssuerACELRX PHARMACEUTICALS INC [ACRX](Check all applicable)	Issuer			
(Last)       (First)       (Middle)       3. Date of Earliest Transaction (Month/Day/Year)				
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting	Applicable Line) _X_ Form filed by One Reporting Person			
Person Person				
(City) (State) (Zip) <b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b>				
1.Title of Security       2. Transaction Date (Month/Day/Year)       2A. Deemed       3.       4. Securities       5. Amount of Security       6. Ownership       7. Nature of Form: Direct         (Instr. 3)       any       Code       Disposed of (D)       Beneficially       (D) or Indirect       Beneficially         (Instr. 3)       (Month/Day/Year)       (Instr. 8)       (Instr. 3, 4 and 5)       Owned       (I)       Ownership         (A)       (A)       (A)       (Instr. 4)       (Instr. 4)       (Instr. 4)         (A)       (Instr. 3 and 4)       (Instr. 3 and 4)       (Instr. 3 and 4)				
Code V Amount (D) Price (Inder's table ) Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.				

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Stock Option (Right to Buy) (1)	\$ 10.22	07/24/2014		А	15,000	08/24/2014(2)(3)	07/23/2024	Common Stock	15,(

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## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
reporting of the runner runners	Director	10% Owner	Officer	Other			
ADAMS ADRIAN C/O AUXILIUM PHARMACEUTICALS, IN 640 LEE ROAD CHESTERBROOK, PA 197087	IC. X						
Signatures							
/s/ Christopher Whitmore, attorney in fact	07/28/2014						
**Signature of Reporting Person	Date						
Explanation of Posponso	<u>.</u> .						

## explanation of Responses:

- 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).
- Issued pursuant to the 2011 Equity Incentive Plan. (1)
- The shares subject to the option vest as follows: 1/24th of the shares subject to the option vest in equal monthly installments over 24 (2) months, subject to Optionee's Continuous Service on the Company's Board of Directors.
- (3) 100% Acceleration upon Change of Control.

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.