FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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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* WESSON BRUCE F (Last) (First) (Middle) C/O ACURA PHARMACEUTICALS, INC. 616 N. NORTH COURT, SUITE 120 (Street) PALATINE IL 60067							2. Issuer Name and Ticker or Trading Symbol ACURA PHARMACEUTICALS, INC ACUR 3. Date of Earliest Transaction (Month/Day/Year) 01/03/2023 4. If Amendment, Date of Original Filed (Month/Day/Year)										S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) below) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St		(Zip)																			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action	ction 2A. Deemed Execution Date,			,	3. Transac Code (I 8)	ction	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			(A) or	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(A) (D)	or	Price	Transact (Instr. 3 a	ion(s)			(Instr. 4)		
Common Stock 01/03/							/2023			M ⁽¹⁾		66,666 A		(2)	792,	,048(3)		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)	title of 2. 3. Transaction Date Execution Date, urity or Exercise (Month/Day/Year) if any				I. Transac	5. Number of Operivative				<u> </u>	able and	7. Title of Secu Underly Derivati (Instr. 3	nd A ities ing ve Se	mount	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	Ownersi Form: Direct (Dor Indirect) (I) (Instr.		Beneficial Ownership ct (Instr. 4)			
					Code	v	(A)	(D)	Da Ex	ite ercisabl		Expiration Date	Title	or No of	umber							
Restricted Stock Units (2021 Plan)	(2)(4)	01/03/2023			М			66,666		(5)		(5)	Commo Stock	1 60	6,666	(6)	0		D			
Restricted Stock Units (2021	(2)(4)	01/03/2023			A			50,000		(7)		(7)	Commo Stock	¹ 50	0,000	(6)	50,000	0	D			

Explanation of Responses:

- 1. Represents exchange of restricted stock units.
- 2. Par value of \$.01 per share must be paid by Reporting Person upon exchange of Restricted Stock Units for stock
- 3. Does not include Restricted Stock Units.
- 4. 1 for 1
- 5. 66,666 Restricted Stock Units were granted on January 3, 2022. 25% of Restricted Stock Units vested on the last day of each of March, June, September and December 2022. Restricted Stock Units are being exchanged on a one for one basis for common stock, in each case upon payment of par value.
- 7. 50,000 Restricted Stock Units were granted on January 3, 2023. 25% of Restricted Stock Units vest on the last day of each of March, June, September and December 2023, subject to immediate vesting in the event of a change of control and certain other events. Reporting Person may elect to exchange up to 40% of Restricted Stock Units for cash and the remaining Restricted Stock Units will be exchanged on a one for one basis for common stock, in each case upon payment of, or deduction of par value. Distributions in respect of vested Restricted Stock Units will be made on the first business day of January 2024, or earlier upon a change of control.

01/05/2023 /s/ Bruce Wesson

** 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.