## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to Section 16. Form 4 or Form 5 ibligations may continue. See instruction 1(b).
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

U obligati	ons may contir tion 1(b).			File							ties Exchang Impany Act o			934		hour	s per re	esponse:	0.5
1. Name and Address of Reporting Person* CARE CAPITAL II LLC (Last) (First) (Middle) 47 HULFISH STREET SUITE 310				AC AC 3. D	2. Issuer Name and Ticker or Trading Symbol ACURA PHARMACEUTICALS, INC ACUR 3. Date of Earliest Transaction (Month/Day/Year) 03/22/2013									5. Relationship of Reporti (Check all applicable) Director Officer (give title below)			X 10% (	Dwner (specify	
(Street) PRINCETON NJ 08542 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applic Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person								son						
		Tab	le I - No	on-Deriv	ative	Se	curitie	s Aco	quired	l, Dis	sposed o	f, o	r Ber	nefic	ially Owi	ned			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day					Execution Date,			Transaction Disposed Code (Instr.		es Acquired (A) o Of (D) (Instr. 3, 4 a			d 5) Secu Bene Owne	ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v			(A) or (D)	Price		rted action(s) 3 and 4)			(Instr. 4)
Common	Stock			03/22/	2013	2013			s		12,554 <sup>(1)</sup>	2,554 <sup>(1)</sup> D		\$2.2	.1 <sup>(2)</sup> 9,	9,623,165			See footnote <sup>(3)</sup>
Common Stock 03/26/2				2013	013		S		27,000 <sup>(4)</sup>	H)	D	\$2.1	.5 <sup>(5)</sup> 9,	9,596,165			See footnote <sup>(6)</sup>		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution Date, 1 ) if any		4. Transaction Code (Instr. 8)				6. Date Exerci Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		; )	8. Price of Derivative Security (Instr. 5)		y Din or (I)	0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Titl	or Nu of	ımber					
	1. Name and Address of Reporting Person*																		
CARE CAPITAL II LLC																			
(Last) (First) (Middle) 47 HULFISH STREET SUITE 310																			
(Street) PRINCETON NJ 08542			542		_														
(City)		(State)	(Zip	))															

1. Name and Address of Reporting  $\operatorname{Person}^{*}$ CARE CAPITAL INVESTMENTS II LP

(Last) 47 HULFISH ST SUITE 310	(First) REET	(Middle)			
(Street) PRINCETON	NJ	08542			
(City)	(State)	(Zip)			
1. Name and Address of Reporting Person*					

Care Capital Offshore Investments II LP

(Last)	(First)	(Middle)					
47 HULFISH STREET							
SUITE 310							
(Street)	NU	005 42					
PRINCETON	NJ	08542					
	(Ctata)	(7in)					
(City)	(State)	(Zip)					

## Explanation of Responses:

1. The shares were sold as follows: 11,748 by Care Capital Investments II, LP and 806 by Care Capital Offshore Investments II, L.P.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.20 to \$2.22, inclusive. The reporting person undertakes to provide to Acura Pharmaceuticals, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnotes (2) and (5) to this Form 4.

3. Consists of 9,005,367 shares held by Care Capital Investments II, LP and 617,798 shares held by Care Capital Offshore Investments II, L.P. Care Capital II, LLC is the general partner of Care Capital Investments II, LP and Care Capital Offshore Investments II, LP and as a result, Care Capital II, LLC has the ultimate power to vote or direct the vote and to dispose or direct the disposition of such shares. Care Capital II, LLC is managed by three or more members and accordingly none of the managing members is deemed to have voting or dispositive control over the securities.

4. The shares were sold as follows: 25,267 by Care Capital Investments II, LP and 1,733 by Care Capital Offshore Investments II, L.P.

5. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.15 to \$2.17, inclusive.

6. Consists of 8,980,100 shares held by Care Capital Investments II, LP and 616,065 shares held by Care Capital Offshore Investments II, L.P. Care Capital II, LLC is the general partner of Care Capital Investments II, LP and Care Capital Offshore Investments II, LP and as a result, Care Capital II, LLC has the ultimate power to vote or direct the vote and to dispose or direct the disposition of such shares. Care Capital II, LLC is managed by three or more members and accordingly none of the managing members is deemed to have voting or dispositive control over the securities.

Care Capital LLC /s/ David R.<br/>Ramsay03/26/2013Care Capital Investments II,<br/>LP, By: Care Capital II, LLC,<br/>Its General Partner /s/ David R.03/26/2013Ramsay03/26/2013Care Capital Offshore<br/>Investments II, LP, By: Care<br/>Capital II, LLC, Its General03/26/2013

\*\* Signature of Reporting Person Date

Partner /s/ David R. Ramsay

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.