SEC For	rm 4 FORM	Л) STA	TES S	ECURITIE	S AN		E)	ХСНА	NG	E CO	оммі	SSION				
		7	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549												OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					ENT OF CHANGES IN BENEFICIAL OWNE led pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									SHIP	Estim	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5		11
1. Name and Address of Reporting Person* Jones Robert B					2. Issuer Name and Ticker or Trading Symbol <u>ACURA PHARMACEUTICALS, INC</u> [ACUR]									eck all applic Directo	able)	, 10% Ow		wner
(Last) (First) (Middle) C/O ACURA PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/20/2023									X Oncer (give title Other (specify below) President & CEO				
616 N. NORTH COURT, SUITE 120					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person				
(Street) PALATINE IL 60067													Form filed by More than One Reporting Person					
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tab	le I - Nor	n-Deriv	ative Se	curities Ac	quirec	l, Di	isp	osed o	of, o	r Ben	eficial	ly Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/C						2A. Deemed Execution Date, if any (Month/Day/Yea	Code	Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			(A) or 3, 4 and	, 4 and Securities Beneficially Owned Foll		Form: I (D) or I		7. Nature of Indirect Beneficial Ownership
							Code	e V		Amount		(A) or (D)	Price	Transact	 Reported Transaction(s) (Instr. 3 and 4) 			(Instr. 4)
Common Stock 11/20							M ⁽¹)		40,00	0	Α	(2)	643	,555		D	
						urities Acqu s, warrants								Owned				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			Date, T	ransaction Code (Instr.	5. Number of Derivative Securities Acquired	6. Date Exercisable and Expiration Date (Month/Day/Year) (Instr. 3 and 4 Expiration Date (Month/Day/Year)				ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned	e s	10. Ownership Form: Direct (D) or Indirect	Beneficia Ownershi		

(1130.3)	Derivative Security		(wonthibay) reary	5)		Acq (A) (Disp of (D	uired or oosed O) (Instr. and 5)			(Instr. 3 and 4)		(1130.3)	Owned Following Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Restricted Stock Unit (2021 Plan)	\$0.01 ⁽²⁾	11/20/2023		М			40,000	(4)	(4)	Common Stock	40,000	(3)	0	D

Explanation of Responses:

1. Represents exchange of restricted stock units.

2. Par value of \$.01 was paid by Reporting Person upon exchange of Restricted Stock Units for stock.

3. Not Applicable.

4. 40,000 Restricted Stock Units were granted on March 16, 2022 and were 100% vested on December 31, 2022

/s/ Robert B. Jones	11/20/2023

** Signature of Reporting Person Date

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

 \ast 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.