								Washii	ngton, D.C.	2054	19					OMB	APPRO	VAL	
Check Section obligat		TOF CHANGES IN BENEFICIAL OWNERSHIP											OMB Number: 3235-0287 Estimated average burden hours per response: 0.5						
					or S	Sectio	n 30(h) of the	Investment	Con	npany Act				-				
1. Name and Address of Reporting Person [*] <u>SKELLY WILLIAM G</u>						2. Issuer Name and Ticker or Trading Symbol <u>ACURA PHARMACEUTICALS, INC</u> [ACUR]									cable) or	10% Ow		wner	
(Last)	, , , , , , , , ,				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2024									below)	(give title	•	below)	specity	
ACURA PHARMACEUTICALS, INC. 616 N. NORTH COURT, SUITE 120					4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) PALATINE IL 60067														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication														
									defense cor										
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transa Date						action 2A. Deemed Execution Date,				Juired, Disposed of, or Benefi 3. Transaction 4. Securities Acquired (A Disposed Of (D) (Instr. 3,			ed (A) or	5. Amou	nt of			7. Nature of Indirect	
(Month/E				Day/Yea	(Month/Day/Year)			ır) 8)			r .	Benefici Owned I Reporte Transac	ollowing (l) (l		Instr. 4)	Beneficial Ownership (Instr. 4)			
Common Stock 01/02								2/2024	Code M ⁽¹⁾	v	Amount (D) P 50,000 A		(2)	(Instr. 3 and 4) 575,989 ⁽³⁾			D		
	Stock	-	Table II -				ritie	s Aca		sno	· · · ·				,909		D		
									, option										
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. Transaction Code (Instr. 8)		of		6. Date Exercisab Expiration Date (Month/Day/Year)		of Securities		ties g Security	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporter Transact (Instr. 4)	ve es ially ng ed etion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Natury of Indirec Beneficia Ownersh (Instr. 4)	
					Code \	v	(A)	(D)	Date Exercisabl		expiration Date	Title	Amount or Number of Shares						
Restricted Stock Units (2021 Plan)	(2)(4)	01/02/2024			М			50,000	(5)		(5)	Common Stock	50,000	(6)	0		D		
Restricted Stock Units (2021	(2)(4)	01/02/2024			A			50,000	(7)		(7)	Common Stock	50,000	(6)	50,0	000	D		

3. Does not include Restricted Stock Units.

4 1 - for - 1

5. 50,000 Restricted Stock Units were granted on January 3, 2023. 25% of Restricted Stock Units vested on the last day of each of March, June, September and December 2023. Restricted Stock Units are being exchanged on a one for one basis for common stock, in each case upon payment of par value.

6. N/A

7. 50,000 Restricted Stock Units were granted on January 3, 2024. 25% of Restricted Stock Units vest on the last day of each of March, June, September and December 2024, 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 2025, or earlier upon a change of control.

/s/ William Skelly	
** Signature of Reporting Person	

01/02/2024 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.