## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

5. Relationship of Reporting Person(s) to Issuer

OMB Number: 3235-02									
Estimated average burden									
hours per response	: 0.5								

	Form 4 or Form 5 ay continue. <i>See</i> ).	5	Filed pursuant to Section 16(a) of the Securities Exchange or Section 30(h) of the Investment Company Act of 1						
1. Name and Add <u>Arthur Dav</u>	•	g Person <sup>*</sup>		2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Salarius Pharmaceuticals, Inc.</u> [SLRX]					
(Last)	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)					

Arthur David J.			Salarius Pharmaceuticals, Inc. [SLRX]	(Check all applicable)				
Aftilur Davi	<u>u J.</u>		,,,,,,,	X	Director	10% Owner		
	(First) IS PHARMACEU ME BLVD., SUITI		3. Date of Earliest Transaction (Month/Day/Year) 05/03/2021	X	Officer (give title below) Chief Executiv	Other (specify below) re Officer		
(Street) HOUSTON	ТХ	77021	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Fil Form filed by One Re Form filed by More th	eporting Person		
(City)	(State)	(Zip)			Person			

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	(D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130. 4)
Common Stock	05/03/2021		A <sup>(1)</sup>		9,822	Α	<b>\$0.567</b>	96,247	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)				Expiration Date (Month/Day/Year) S		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

#### Explanation of Responses:

1. The reporting person voluntarily agreed to receive a percentage of his base salary in issuer shares and receive these shares in lieu of net cash compensation. Shares are purchased at a price determined pursuant to the issuer's Employee Stock Purchase Plan.

#### **Remarks:**

## /s/Mark Rosenblum, as Attorney-in-Fact

05/05/2021

\*\* 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.

# Check this box if no longer subject