FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* Rosenblum Mark J					2. Issuer Name and Ticker or Trading Symbol Salarius Pharmaceuticals, Inc. [SLRX]									ck all app Direc	tionship of Reporti all applicable) Director Officer (give title		10% O		
(Last) (First) (Middle) C/O SALARIUS PHARMACEUTICALS, INC. 2450 HOLCOMBE BLVD., SUITE X					3. Date of Earliest Transaction (Month/Day/Year) 08/17/2020									pelov	xec VP F	inanc	below)		
(Street) HOUST(ON TX	7	7021 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - Non	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	osed of	, or E	Bene	icial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)					Execution D			Transaction Code (Instr.					3, 4 and Securit		ies cially Following	Forn (D) o	n: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	Amount	(A) (D)	or F	rice	Transa	ction(s) 3 and 4)			(111341. 4)					
Common Stock 08/17/2					/2020				P		5,000		A	\$1	12	2,000		D	
		Tal									sed of, onvertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date,			4. Transaction Code (Instr. 8)		vative vrities vired r oosed) r. 3, 4	Expiration Da		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Share		str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

Remarks:

/s/ Mark J. Rosenblum

08/17/2020

** 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.