FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | no longer subject to Section 1 obligations may continue. Se | Filed ever | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 | | | | | | | | | 0.5 | | |
|--|--|--|--|-----------------------------------|---------|---|------------------------|-------------|---|------------------------------------|--|--|--|--|
| | | | | ection 30(h) of the | | | | 1934 | | <u></u> | | | | |
| 1. Name and Address <u>McVicar Willi</u> | ss of Reporting Person [*] iam <u>K.</u> | | 2. Issuer Name and Ticker or Trading Symbol <u>Salarius Pharmaceuticals, Inc.</u> [SLRX] - | | | | | | | Person(s) to Iss below) | 10% Ow | vner | | |
| 1 | (First) PHARMACEUTICAI BE BLVD., SUITE J - | | 3. Date of Earliest Transaction (Month/Day/Year) 03/23/2020 | | | | | | | - | | | | |
| (Street) | | 4. If Amendm | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| HOUSTON | TX | 77021 | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (State) | (Zip) | | | | | | | | | | | | |
| | | Table I | - Non-Derivative | Securities Ac | quired, | Disp | osed of, or Be | eneficially | / Owned | | | | | |
| 1. Title of Security (| Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any | 3. Transaction Code (Instr. 8) | | 4. Securities Acq (D) (Instr. 3, 4 and | uired (A) or D 1 5) | isposed Of | 5. Amount of Securi Beneficially Owned Following Reported | d Direct (D) o d Indirect (I) (|) or | 7. Nature of Indirect Beneficial | | |
| | | | (Month/Day/Year) | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Inst and 4) | r. 3 | | Ownership (Instr. 4) | | |
| | | Table | e II - Derivative So (e.g., puts, c | ecurities Acqu alls, warrants, | | | | | Dwned | · | | | | |

| 1. Title of Derivative Security (Instr. 3) | Conversion | Date | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Underlying Derivative Security (Instr. 3 and 4) | | Derivative Security (Instr. 5) | derivative | Ownership Form: Direct (D) or Indirect (I) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|------------|------------|---|-----------------------------------|---|--|-----|--|--------------------|---|----------------------------------|--------------------------------------|--|---|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Reported Transaction(s) (Instr. 4) | (Instr. 4) | |
| Common Stock | \$0.61 | 03/23/2020 | | A | | 6,000 | | (1) | 03/22/2030 | Stock Option (right to buy) | 6,000 | \$0 | 6,000 | D | |

Explanation of Responses:

1. Options granted are fully vested on March 23, 2021.

Remarks:

/s/ Robert Hadfield, Attorney-in-Fact 03/25/2020 ** Signature of Reporting Person Date

OMB APPROVAL

3235-0287

OMB Number:

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. 78f(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.

POWER OF ATTORNEY Know all by these presents, that the undersigned hereby constitutes and appoints each of Robert Hadfield or John McCabe, signing individu (1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer, director or beneficial owner of more than (2) do and perform any and all acts for and on behalf of the undersigned that may be necessary or desirable to execute such Forms 3, 4 o (3) take any other action of any nature whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may I The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whats This Power of Attorney shall remain in full force and effect until the earliest to occur of (a) the undersigned is no longer required to

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of April 5, 2017. /s/ William McVicar