# FORM 4

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

| OMB APPROVAL            |           |  |  |  |  |
|-------------------------|-----------|--|--|--|--|
| MB Number:              | 3235-0287 |  |  |  |  |
| stimated average burden |           |  |  |  |  |
| ours per response       | e 0.5     |  |  |  |  |

longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Type Response   | s)                     |  |  |  |            |   |                                     |                             |   |  |  |  |   |                      |                         |
|---|------------------------|--|--|--|------------|---|-------------------------------------|-----------------------------|---|--|--|--|---|----------------------|-------------------------|
| 1. Name and Address of Reporting Person *  2. Issuer Nam BLECH ISAAC Cerecor Inc. |                        |  |  | Name and Ticker or Trading Symbol nc. [CERC] |            |   |                                     |                             |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner |  |  |   |                      |                         |
| 400 E. PRATT STR  | EET, SUITE 606         |  | 3. Date of Earliest Transaction (Month/Day/Year) 09/30/2017                  |  |            |   |                                     | Officer (give               | title below)  | Oth  | er (specify below  | )  |   |                      |                         |
| BALTIMORE, MD   | (Street)<br>21202      | 4  | 4. If Amendmen   |  |            | nent, Date Original Filed(Month/Day/Year) |                                     |                             |   | _X_1   | 6. Individual or Joint/Group Filing(Check Applicable Line)  X_Form filed by One Reporting Person  Form filed by More than One Reporting Person |  |   |                      |                         |
| (City)  | (State)                | (Zip)                                      | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially O |  |            |   |                                     |                             |   | ficially Own   | ed   |  |   |                      |                         |
| 1.Title of Security<br>(Instr. 3)   |                        | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Dee<br>Executionary<br>(Month/   | on Da  | ite, if C  | Tran                                      | 8) (                                | (A) or I                    | Disposed of 3, 4 and 5)  (A) or (D) I                                     | (D) Own<br>Tran  |  | ecurities Being Reported   | d 1   | Ownership o<br>Form: | Beneficial<br>Ownership |
| Reminder: Report on a s   | separate line for each | Table II - 1                               | Derivativ  | e Sec  | curities . | Acqu                                      | Person<br>contai<br>form of         | ns who<br>ned in<br>display | this form<br>ys a curre   | n are not<br>ntly valid<br>icially Ow  | required<br>OMB co   | of informa<br>to respond<br>ntrol numl   | d unless th   |                      | 474 (9-02)              |
| Derivative Conversion Date Execution D Security or Exercise (Month/Day/Year) any  |                        | 3A. Deemed<br>Execution Date, if           | 4.<br>Transaction<br>Code  |  | 5. Number  |   | Expiration Date<br>(Month/Day/Year) |                             | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and 4) |  |  | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | Ownershi Form of Derivative Security: Direct (D or Indirect | (Instr. 4)           |                         |
|   |                        |  | Code   | V  | (A)        | (D)                                       | Date<br>Exercisab                   |                             | xpiration<br>ate  | Title  | Amount<br>or<br>Number<br>of<br>Shares   |  |   |                      |                         |
| Employee<br>Stock<br>Option \$ 0.85<br>(Right to<br>Buy)                          | 09/30/2017             |  | A  |  | 27,560     |   | 09/30/20                            | 017 09                      | 9/29/2027   | Commo:<br>Stock  |  | \$ 0   | 27,560  | D                    |                         |
| Reporting O   | wners                  | Dolotionshin                               |  |  |            |   |                                     |                             |   |  |  |  |   |                      |                         |

|  | Relationships |           |         |       |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address   | Director      | 10% Owner | Officer | Other |  |  |  |
| BLECH ISAAC<br>400 E. PRATT STREET<br>SUITE 606<br>BALTIMORE, MD 21202 | X             |           |         |       |  |  |  |

# **Signatures**

| /s/ Robert Swedberg, by Power of Attorney | 09/30/2017 |
|---|------------|
| **Signature of Reporting Person           | Date       |

## **Explanation of Responses:**

- \* 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.