FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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Check this box if no 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 Ty	pe Response	-)													
1. Name and Address of Reporting Person* Miller Joseph M			2. Issuer Name and Ticker or Trading Symbol Cerecor Inc. [CERC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O CERECOR INC., 540 GAITHER ROAD, SUITE 400			3. Date of Earliest Transaction (Month/Day/Year) 06/10/2019						X Officer (give title below) Other (specify below) Chief Financial Officer						
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
ROCKVILLE, MD 20850 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					ies Acquire	pired. Disposed of, or Reneficially Owned						
1.Title of Security 2. Transaction Date (Month/Day/Year				te, if Co	Transaction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		quired 5 (C) (S) T	5. Amount of Securities Beneficial Owned Following Reported Transaction(s)		Beneficially	6. Ownership Form:	7. Nature of Indirect Beneficial		
				(Month/Day/Yea			Code V	Amount	(A) or (D)	Price	or Inc (I)			Ownership (Instr. 4)	
Commor	n Stock		06/10/2019				P	1,179 (1)	A	\$ 2.8475 4	46,179		Г	D	
Reminder:			Table II -	Derivati	ve Sec	curities /	in th disp	ays a cui	rrently	y valid OM	to respond IB control i	unless th	e form		· · ·
1. Title of		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	stion S	Is, warra 5. Number of Derivativ Securities Acquired (A) or Disposed of (D)	in th displactured, Dints, options, 6. Date Ex Expiration (Month/Da	s form and ays a cumus ays a cumus ays a cumus ays a cumus ays ays ays ays ays ays ays ays ays ay	or Be	y valid OM neficially O	to respond IB control i Owned d Amount ving	unless th number.	9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivati Security Direct (or Indire	Beneficial Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	(e.g., put 4. Transac Code (Instr. 8	5 (1) S A (1) (2) (3) (4) (4) (4) (5) (6) (6) (6) (7	s, warra 5. Number of Derivativ Securities Acquired A) or Disposed of (D) Instr. 3, 1, and 5)	in the displayment of the displa	is form all ays a cui	or Be ole second	neficially Ourities) 7. Title and of Underly Securities	d Amount or Number	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivate Security Direct (or Indirect)	hip of Indire Beneficiative Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	5 (1) S A (1) (2) (3) (4) (4) (4) (5) (6) (6) (6) (7	Is, warra 5. Number of Derivativ Securities Acquired (A) or Disposed of (D) Instr. 3,	in the displayment of the displa	is form all ays a cui	or Be ole second	y valid OM neficially O urities) 7. Title and of Underly Securities (Instr. 3 an	Amount or Number of Shares	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivat Security Direct (or Indirect) (Instr. 4	hip of Indire Beneficiative Ownersh (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Miller Joseph M C/O CERECOR INC. 540 GAITHER ROAD, SUITE 400 ROCKVILLE, MD 20850			Chief Financial Officer		

Signatures

/s/ Donald R. Reynolds, by Power of Attorney

06/11/2019

**Signature of Reporting Person	Da	te

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).
- (1) These shares were acquired under the Issuer's 2016 Employee Stock Purchase Plan.
- One fourth of the shares subject to the stock option will vest on the first anniversary of the date of grant, and the remaining three-fourths of the shares subject to the stock option will vest in equal monthly installments over the following 36 months.

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.