FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasimigion, B.S. 20045

	OMB APP	ROVAL
	OMB Number:	3235-0287
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0.5

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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).

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

				Oi	Jecu	011 30(11) 0	JI LIIC	invesiment C	ompany Act	01 13-0							
1. Name and Address of Reporting Person*  Egan James					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Sucampo Pharmaceuticals, Inc. [ SCMP ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
				-		r			,	_		Direct	or		10% Ow	ner	
(Look) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)					$\dashv$	X Officer below)	er (give title w)		Other (s below)	pecify		
(Last) (First) (Middle) 4520 EAST WEST HWY, STE 300					12/08/2010						Chief Operating Officer						
4520 EAST WEST HW 1, STE 500																	
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)						
BETHESDA MD US 20814										X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	tate)	(Zip)									Perso	1				
		Tab	le I - Non-D	erivativ	e Se	curities	Ac	quired, Di	sposed o	f, or Be	neficial	ly Owned	<u> </u>				
1. Title of	Security (Ins	tr. 3)	2. 1	Fransaction	· [:	2A. Deeme	ed	3.		ties Acquir		5. Amou	nt of	6. Owner	rship 7	. Nature	
Date			te onth/Day/Ye	ay/Year) Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 3, 5)  Disposed Of (D) (Instr. 3, 5)		str. 3, 4 and	Benefici	ally		or Indirect	of Indirect Beneficial Ownership				
						Code V	Amount	(A) o	r Price	Reported Transact (Instr. 3	d tion(s)			Instr. 4)			
		-	Fabla II Day	wis co tis co	Caa	uvition	Λ	ired Die			oficially						
		l	able II - Deı e.ç)					, options,				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	Code				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (Right to	\$3.68	12/08/2010		A		80,000		(1)	12/08/2020	Class A common stock	80,000	\$0	80,000		D		

## **Explanation of Responses:**

1. Commencing on December 8, 2011, the first anniversary of the original grant date, the option vests annually with respect to 25% of the aggregate option share total.

/s/ James J. Egan

12/16/2010

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.