FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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0.5

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

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* MAUDLIN TIMOTHY I						2. Issuer Name and Ticker or Trading Symbol Sucampo Pharmaceuticals, Inc. [SCMP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
																	10% Owi	ner	
(Last) (First) (Middle) 4520 EAST WEST HWY, 3RD FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 05/15/2013											Other (sp below)	pecify	
(Street) BETHESDA MD US 20814					4. If Amendment, Date of Original Filed (Month/Day/Year)								- 1	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 Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Executio if any	2A. Deemed Execution Date, if any (Month/Day/Year		, Transaction Code (Instr.		4. Securitie Disposed C			5. Amount Securities Beneficially Following		Form:	Direct Ir Indirect B str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	,	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				nstr. 4)	
Class A Common Stock 05/15					/2013			P		32,870(1	1) A	\$9.82	32,870			D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		5. Number Derivative Securities Acquired or Dispos of (D) (Ins 4 and 5)	(A) ed	Exp	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 of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Director Stock Option (Right to	\$5.18 ⁽²⁾	05/15/2013		P		32,870 ⁽¹⁾		05/2	20/2011 ⁽³⁾	05	5/22/2022 ⁽⁴⁾	Class A Common Stock	32,870(1)	\$9.82	32,81	70	D		

Explanation of Responses:

- 1. Shares in the amount of 32,870 were purchased through the exercise, on a net basis, of 36,629 stock options. The reporting person undertakes to provide Sucampo Pharmaceuticals, Inc., any security holder of Sucampo Pharmaceuticals, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.
- 2. The price reported in Column 2 is a weighted average price. The conversion price of these shares were granted in multiple option awards at prices ranging from \$3.56 to \$7.71, inclusive.
- 3. The options became excerisable from dates ranging from 05/20/2011 to 02/25/2013, inclusive.
- 4. The options had expiration dates ranging from 05/22/2019 to 05/22/2022, inclusive.

/s/ Timothy I. Maudlin 06/05/2013

** 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.