FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

hours per response:	0.5
Estimated average burden	

1. Name and Address of Reporting Person [*] THOMPSON VIRGIL D			2. Issuer Name and Ticker or Trading Symbol QUESTCOR PHARMACEUTICALS INC		ionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner			
(Last) (First) (Middle)		(Middle)	[QCOR]		Officer (give title below)	Other (specify below)		
(Last) (First) (Middle) 1300 NORTH KELLOGG DRIVE SUITE D		(midule)	3. Date of Earliest Transaction (Month/Day/Year) 10/14/2013		2000)	,		
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)	СА	92807		X	Form filed by One Report	ing 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. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V		Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	10/14/2013		М		2,500	Α	\$4.5	32,367	D	
Common Stock	10/14/2013		S		1,600	D	\$60.3025 ⁽³⁾	30,767	D	
Common Stock	10/14/2013		S		900	D	\$60.8556 ⁽³⁾	29,867	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of Expir		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned	10. Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	cooling					(A) or Disposed of (D) (Instr. 3, 4 and 5)				(Instr. 3 and 4)			Following Reported Transaction(s) (Instr. 4)	(I) (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy) ⁽¹⁾	\$4.5	10/14/2013		М			2,500	(2)	02/27/2018	Common Stock	2,500	\$0	0	D	

Explanation of Responses:

1. Non-qualified stock options were granted under the Company's 2006 Equity Incentive Award Plan.

2. The option was granted on 02/29/2008 for the right to buy 7,500 shares of common stock of the Issuer. The options vested 100% on the date of grant.

3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$59.71-\$60.71 and \$60.72-\$60.99, respectively. The reporting person undertakes to provide Questcor Pharmaceuticals, Inc., any security holder of Questcor 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 ranges set forth in this Form 4.

Remarks:

The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 Trading Plan adopted by the reporting person in the third quarter of 2012, which plan controls the exact dates and amounts of sales.

<u>/s/ Virgil D. Thompson</u>	<u>10/16/2013</u>
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** Signature of Reporting Person

Date

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

 \ast 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.