FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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gton, D.C. 20549	OMB APPROVAL

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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

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* <u>Fischer Seth H. Z.</u>														ationship of I c all applicat Director		porting Person(s) to Issuer 10% Owner		
	US, INC.	First) AVE., SUITE 5	(Middle)		3. Date 01/27/	of Earliest ²	Transa	action (Mor	nth/Da	ay/Year)			X	Officer (g below) Chi			Other (s below) Officer	pecify
(Street) CAMPBELL CA 95008					4. If Amendment, Date of Original Filed (Month/Day/Year)							I	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)	(5	State)	(Zip)															
		Т	āble I - Non-D	Deriva	tive S	ecuritie	s Ac	quired,	Dis	posed o	of, or Bo	enefi	cially (Owned				
Date				Transaction ate lonth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			5. Amount Securities Beneficiall Owned Fol	y	Form:	Direct Indirect It. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	or I	Price	Reported Transactio (Instr. 3 an				(Instr. 4)
Common Stock ⁽¹⁾ 01/2				01/27/2	7/2017		A		150,00	00(2)	A	\$0	636,080			D		
			Table II - De			curities Ils, warr								wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title an Securitie Derivativ (Instr. 3 a	s Unde e Secu	erlying	ying Derivative		er of e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	e V	(A)		Date Exercisabl		xpiration ate	Title		ount or ober of res		Transact (Instr. 4)	ion(s)		
Employee Stock Option (right to	\$1.12	01/27/2017		A		1,000,000		(3)	0:	1/27/2024	Common Stock	1,00	00,000	\$0	1,000,000		D	

Explanation of Responses:

- $1. \ Each \ restricted \ stock \ unit \ represents \ a \ contingent \ right \ to \ receive \ one \ share \ of \ VIVUS, \ Inc. \ common \ stock.$
- 2. The restricted stock units vest according to the following schedule: twenty-five percent (25%) of the total restricted stock units vest on January 27, 2018 with an additional six and one quarter percent (6.25%) of the total restricted stock units vesting quarterly thereafter (i.e., April 27th, July 27th, October 27th, and January 27th) until all of the restricted stock units are vested, subject to such individual continuing to be a Service Provider (as defined in the Issuer's 2010 Equity Incentive Plan) on the relevant vesting dates.
- 3. Twenty-five percent (25%) of the total number of shares underlying the option will vest and become exercisable on January 27, 2018, and one forty-eighth (1/48th) of the total number of shares underlying the option will vest on the 27th of each month thereafter, subject to the reporting person continuing to be a Service Provider (as defined in the Issuer's 2010 Equity Incentive Plan) on the relevant vesting dates.

Remarks:

/s/ Julie Hollenback, Attorney-

01/31/2017

in-Fact

** 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.