FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPROVAL									
l	OMB Number:	3235-0287								
l	Estimated average burd	en								
l	hours per response:	0.5								

	Check this box if no longer subject to								
١	Section 16. Form 4 or Form 5								
J	obligations may continue. See								
	Instruction 1(b)								

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Instruc	tion 1(b).			Filed							ties Exchan mpany Act			34		Hours	- per rec		0.5	
1. Name and Address of Reporting Person* Suh Kenneth					2. Issuer Name and Ticker or Trading Symbol VIVUS INC [VVUS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Sun Kenneur</u>															Director Officer (give title			10% Ow Other (s		
(Last) (First) (Middle) C/O VIVUS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 01/23/2019									X Office (give the below) below) President						
900 E. HAMILTON AVE., SUITE 550					4. If Amendment, Date of Original Filed (Month/Day/Mass)									6 In	6. Individual or Joint/Group Filing (Check Applicab					
(Street)	EII C	Δ.	95008		4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)				·	
CAMPBELL CA 95008															Form filed by More than One Reporting Person				ting	
(City)	(S		(Zip)	Davissa	41	<u></u>				Di-			D	£: a : a !!	0	1				
			le I - Non						_	פוט	_				_					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						r) E	2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				ies Following (I)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
		٦	Fable II - E								osed of, converti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date, Tra	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiration (Month/Da	n Date	е	7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	ode \	/	(A)	(D)	Date Exercisal		Expiration Date	Title	N O	lumber						

Explanation of Responses:

\$4.05

1. 12,560 of the total number of shares underlying the option vest on January 23, 2020, and 1,040 of the total number of shares underlying the option vest on the last day of each month thereafter for thirty-six months and 35,000 of the total number of shares underlying the option vest upon the Issuer's acquisition of a new commercial enterprise on or before January 23, 2022, subject to the reporting person continuing to be a Service Provider (as defined in the Issuer's 2018 Equity Incentive Plan) on the relevant vesting dates.

(1)

2. The option expires on the earlier of (a) January 23, 2026 and (b) the twelve (12) month anniversary of the date the reporting person ceases to be a Service Provider (as defined in the Issuer's 2018 Equity Incentive Plan).

85,000

Remarks:

Employee Stock Option

(right to buy)

> /s/ Julie Hollenback, Attorneyin-Fact 01/25/2019

85,000

\$<mark>0</mark>

85,000

D

Common

Stock

(2)

** 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).

01/23/2019

** 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.