FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHAN	GES IN F	RENEEICIAI	OWNERSHIP
SIAILMLINI	OF CHAIN	GES IIV E	DENEFICIAL	CWINERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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l	hours per response:	0.5

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

1. Name and Address of Reporting Person* Roberts Eric W					2. Issuer Name and Ticker or Trading Symbol VIVUS INC [VVUS]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
															C Director	or		10% O	wner		
(Last)	(Fi	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/15/2017										Officer below)	(give title	Other (s below)		specify	
900 E. H	AMILTON	AVE SUITE 5	50																		
900 E. HAMILTON AVE., SUITE 550				4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
(Street)															Line		filed by On	a Dani	orting Perso	nn.	
CAMPB	ELL C	A	95008												1 4		•		•		
CHINID			55000													Perso		re tnar	n One Repo	orting	
(City)	(S	tate)	(Zip)																		
		Tab	le I - Noi	า-Deriv	ative	e Se	curiti	ies Ac	quire	l, Dis	spo	sed c	of, or B	enef	iciall	y Owne	d				
Date			Date	h/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)					es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Cod	e v	A	Mount	(A) (D)	(A) or (D) Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 02/15/					5/201	2017		М	Τ		1,389	9 <i>A</i>		(1)		3,217		D			
Common Stock 02/15			5/201	D ⁽²)		539 D		\$1.1	1 42,678			D							
		Т	able II -										or Bei ble sec			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		1. Transaction Code (Instr.		5. Number 6		Date Exercisal xpiration Date Month/Day/Year)		ole and 7. Title and Amount of		of s ng e Sec		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	Code	v	(A)	(D)	Date Exercis		Expir Date	ration	Title	or	ount mber ares						
Restricted Stock Units	(1)	02/15/2017			М			1,389	(3)			(3)	Common	T	389	\$0	26,390)	D		

Explanation of Responses:

- $1. \ Restricted \ stock \ units \ converted \ into \ VIVUS, \ Inc. \ common \ stock \ on \ a \ 1-for-1 \ basis \ upon \ vesting.$
- 2. The reporting person did not sell or otherwise dispose of any of the shares reported on this Form 4 for any reason other than by way of forfeiture to VIVUS, Inc. in order to cover estimated tax liability.
- 3. The restricted stock units vest according to the following schedule: 8/36ths of the total restricted stock units originally granted vested on May 15, 2016, and an additional 1/36th of the total restricted stock units originally granted vest on the 15th of each month thereafter, subject to the individual continuing to be a Service Provider (as defined in the VIVUS, Inc. 2010 Equity Incentive Plan) on the relevant vesting

Remarks:

/s/ Julie Hollenback, Attorney-02/17/2017 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.