## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Roberts Eric W						2. Issuer Name <b>and</b> Ticker or Trading Symbol VIVUS INC [ VVUS ]										k all appli Directo	cable) or	g Per	son(s) to Iss	vner			
(Last)	(Fi	irst) (	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/15/2017  Officer (give title below) below) below)												specify						
900 E. HAMILTON AVE., SUITE 550						4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	ELL C	A 9	95008												X	<b>,</b>							
(City)	(S	tate) (	(Zip)																				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		n Dispo				4 and Secu Bene		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Cod	v	Amoi	ınt	(A) or (D)	Pric	е	Transac	Transaction(s) (Instr. 3 and 4)			(111341. 4)			
Common Stock 03			03/15	/2017				М		1,	389	A	A (1		44,067		D						
Common Stock 03/15/				/2017		D <sup>(2</sup>		5	39	) D \$		.11	1 43,528		8 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/Ye:	Date,	4. Transactic Code (Inst 8)		on of		6. Date Expirati (Month/	n Dat		Amount of		J Securit	Di Si (li	B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owr Forr Dire or Ir (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis		Expiratio Date	n Tit	tle	Amour or Number of Shares	er								
Restricted Stock Units	(1)	03/15/2017			М			1,389	(3)		(3)		ommon Stock	1,389	9	\$0	25,001	L	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-03/17/2017 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.