FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

wasiiiigtori, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-		

OMB Number: 3235-0287								
Estimated average burden								
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

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1. Name and Address of Reporting Person* SAVAS PAUL G				2. Issuer Name and Ticker or Trading Symbol VTv Therapeutics Inc. [VTVT]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
SAVAS PAUL G			<u></u>									X	Direc	ctor		10% O	wner				
(Last) (First) (Middle) C/O VTV THERAPEUTICS INC.				3. Date of Earliest Transaction (Month/Day/Year) 03/28/2016										Office belov		cer (give title ow)		Other (below)	(specify		
4170 MENDENHALL OAKS PKWY				4. If	If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) HIGH PC	DINT N	C 2	27265													X		n filed by One n filed by Mo on			
(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				Execution Date,			Code (Instr. 5)					Securi Benefi Owned	. Amount of Securities Seneficially Dwned Following Reported		Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
						Co	de V		Amount	(A) or D)	Price		Transaction(s) (Instr. 3 and 4)				(111511.4)			
Class A common stock 03/28/			8/2016	/2016		F			5,000		A \$5		5.3 46,522		6,522	D					
Class A common stock 03/28			/2016			F			5,000		A	\$5.39		51,522			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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any				ransaction of ode (Instr. Derivative		vative irities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3		vative (urity 5	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	isable		Expiration Date	Title	or	ount nber res						

Explanation of Responses:

/s/ Paul G. Savas

03/30/2016

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).