Edgar Filing: VITAL THERAPIES INC - Form 4

VITAL THERAP Form 4	PIES INC									
May 26, 2016										
FORM 4	UNITED	STATES	SECU	RITIES A	ND EX(CHANGE			APPROVAL	
Check this box			shington				Number:	3235-0287		
if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.	STATEN Filed put	rsuant to S (a) of the I	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section					Estimated burden ho response	Estimated average burden hours per response 0.5	
<i>See</i> Instruction 1(b).		30(h)	of the li	nvestment	Compan	y Act of 1	940			
(Print or Type Respon	nses)									
1. Name and Addres Satter Muneer A	s of Reporting	Person <u>*</u>	Symbol	er Name and L THERAI			5. Relationship Issuer	of Reporting Pe	rson(s) to	
(Last) (First) (Middle)		of Earliest T		[VIL]	(Cho	eck all applicab	le)	
C/O VITAL THI INC., 15010 AV SCIENCE, SUIT	ERAPIES, ENUE OF	(viluale)		Day/Year)	ansaction		X Director Officer (giv below)		0% Owner her (specify	
(SAN DIEGO, CA	Street) A 92128			endment, Da onth/Day/Year	-		6. Individual or Applicable Line) _X_ Form filed by Form filed by Person		Person	
(City) (State)	(Zip)	Tab	ole I - Non-I	Derivative S	Securities A	cquired, Disposed	of, or Beneficia	ally Owned	
	unsaction Date th/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transaction Code (Instr. 8) Code V		(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report on	a separate line	e for each cla	ass of sec	urities benef	icially own	ed directly o	or indirectly.			
					inform require	ation cont ed to respo ys a currei	spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab			curities Acq s, warrants			Beneficially Owner securities)	1		
1. Title of 2.	3. Trans	saction Date	3A. Dee	emed	4.	5. Number	of 6. Date Exerci	sable and	7. Title and Amou	

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	iorDerivative	Expiration Date	Underlying Securities	D

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		S (1
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 8.17	05/24/2016		А	30,239		<u>(1)</u>	05/23/2026	Common Stock	30,239	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Satter Muneer A C/O VITAL THERAPIES, INC. 15010 AVENUE OF SCIENCE, SUITE 200 SAN DIEGO, CA 92128	Х	Х					
Signatures							
/s/ Jon-Micheal A. Wheat, by power of attorney	05/26/2016						
**Signature of Reporting Person		Date					

Explanation of Responses:

- * 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).

Subject to reporting person's continuing to be a Service Provider (as defined in the 2014 Equity Incentive Plan) through the vesting date,
100% of the shares subject to the option shall vest and become exercisable upon the earlier of the one (1) year anniversary from May 24, 2016 and the day prior to the Company's 2017 annual meeting of stockholders.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.