## Edgar Filing: VIVUS INC - Form 4

VIVUS INC

Form 4 May 19, 200											
FORM 4 LINUTED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
-	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer				NGES IN BENEFICIAL OWNERSHIP O SECURITIES					Expires: January 3 20 Estimated average burden hours per response		
Form 5 obligatio may com <i>See</i> Instr 1(b).	tinue. Section 17(	a) of the H	Public U		ding Cor	npan	y Act of	Act of 1934, 1935 or Sectior 0	1		
(Print or Type ]	Responses)										
Dev Wester			Symbol	Issuer Name <b>and</b> Ticker or Trading 1bol				5. Relationship of Reporting Person(s) to Issuer			
VIV				IVUS INC [VVUS]				(Check all applicable)			
(Mo			3. Date of Earliest Transaction (Month/Day/Year) 05/14/2008					Director 10% Owner X Officer (give title Other (specify below) below) VP, Clinical Research			
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MOUNTAI	N VIEW, CA 940	040						Form filed by M Person			
(City)	(State)	(Zip)	Tab	le I - Non-D	Derivative	Secur	ities Acqu	iired, Disposed of,	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d 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)	
Common Stock	05/14/2008			P <u>(1)</u>	3,297	A	\$ 4.1735	16,843	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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/Year)	4. Transac Code (Instr. 8	5. tionNumber of ) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code Y	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
Day Wesley 1172 CASTRO STREET MOUNTAIN VIEW, CA 94040			VP, Clinical Research					
Signatures								
By: Kate Higgins For: Wesley Day	0.	5/19/2008						
**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).

(1) Acquired 3,297 shares through Employee Stock Purchase Plan Offering Period ending on 5/14/08.

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.