Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 0.01271 | |
|-------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average | e burden |

OMB APPROVAL

0.5

hours per response: Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | or S | Section 30(h) of the Inv | vestmer | it Con | npany Act of 19 | 940 | | | | | | |
|---|---|----------|---|--|----------------------------|--------|---|---------------------------------|--|---|--|--|--|--|
| 1. Name and Address of Reporting Person* Greenleaf Peter | | | | | | - | • | | k all applicable) Director | • () | | | | |
| | (First) M BOULEVAR | (Middle) | | | ction (M | onth/D | Day/Year) | | | Officer (give title below) | | | | |
| SUITE 550 | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | |
| (Street) ROCKVILLE | MD | 20850 | | | | | | | X | • | | | | |
| (City) | (State) | (Zip) | | | | | | | | | | | | |
| | 2. Issuer Name and Ticker or Trading Symbol Mast Therapeutics, Inc. [MSTX] [First) (Middle) NG FARM BOULEVARD 550 4. If Amendment, Date of Original Filed (Month/Day/Year) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | |
| Date | | Date | Execution Date, Transaction Disposed Of (Execution Date, if any Code (Instr. 5) | | sposed Of (D) (Instr. 3, 4 | | Securities Beneficially Owned Following Reported | Form: Direct (D) or Indirect | of Indirect Beneficial Ownership | | | | | |
| | | | | | Code | v | Amount | (A) or (D) | Price | | | | | |

| | 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/Year) | 4. Transa Code (8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | ate | and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | curities Derivative Security (Instr. 5) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option | \$0.43 | 06/15/2016 | | A | | 79,551 | | (1) | 06/15/2026 | Common | 79,551 | \$0.00 | 79,551 | D | |

Explanation of Responses:

1. This option vests and becomes exercisable in 12 substantially equal monthly installments on each monthly anniversary of June 15, 2016, subject to the reporting person's continued service with the issuer.

Remarks:

(Right to

Buy)

/s/ Brian M. Culley, Attorneyin-Fact for Peter Greenleaf

Stock

06/17/2016

** 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.