FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL						
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

			or Secti	on 30(h) of t	hè Ínvestment Company Act of 19	940				
1. Name and Address of Reporting Person*  Zambon Co SpA  2. Date of Event Requiring Staten (Month/Day/Year 06/07/2017			nent	3. Issuer Name and Ticker or Trading Symbol Savara Inc [ SVRA ]						
(Last) (First) (Middle) VIA LILLO DEL DUCA, 10				Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) BRESSO L6				Officer (give title Other (specify below) below)			6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  X Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I New	Davissati	vo Convition Donoficial	l O				
1. Title of Security (Instr. 4)				2.	ve Securities Beneficial  Amount of Securities eneficially Owned (Instr. 4)	3. Ownersh Form: Direct or Indirect (Instr. 5)	ct (D)	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stoc	k				4,693,540	I		By Su	ubsidiary <sup>(1)</sup>	
		(e.			Securities Beneficially nts, options, convertible		s)			
1. Title of Derivative Security (Instr. 4)  2. Date Exerci Expiration Dat (Month/Day/Ye				ate	Underlying Derivative Security (Instr. 4) Conv or Ex		Conve	ercise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security		Direct (D) or Indirect (I) (Instr. 5)		
1. Name and Add	dress of Reporting	Person*								
(Last) VIA LILLO I	(First) DEL DUCA, 10	(Middle	)							
(Street) BRESSO	L6									
(City)	(State)	(Zip)								
1. Name and Add	dress of Reporting	Person*								
(Last) VIA LILLO I	(First) DEL DUCA, 10	(Middle	)							
(Street) BRESSO	L6									
(City)	(State)	(Zip)								

## **Explanation of Responses:**

1. Shares are held directly by Zambon SpA, a wholly owned subsidiary of Zambon Company SpA.

## Remarks:

/s/ Rosella De Dominicis, Head 06/29/2017 of Legal Affairs /s/ Rosella De Dominicis, Head 06/29/2017

of Legal Affairs

Date

\*\* Signature of Reporting Person

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).