

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person* <u>RAMSAY DAVID A</u> (Last) (First) (Middle) <u>6836 BEE CAVE ROAD, BUILDING III SUITE 200</u> (Street) <u>AUSTIN TX 78746</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Savara Inc [SVRA]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>04/27/2017</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	04/27/2017 ⁽¹⁾		M		1,142	A	\$0.00	23,570	D	
Common Stock	06/17/2019		P		10,000	A	\$2.39	33,570	D	
Common Stock	06/17/2019		P		10,000	A	\$2.38	43,570	D	
Common Stock	06/17/2019		P		5,000	A	\$2.37	48,570	D	
Common Stock	06/18/2019		P		5,000	A	\$2.36	53,570	D	
Common Stock	06/18/2019		P		10,215	A	\$2.35	63,785	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (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 Exercisable	Expiration Date						Title
Restricted Stock Units	\$0.00	04/27/2017 ⁽¹⁾		M			1,142 ⁽²⁾	(3)	(3)	Common Stock	1,142	\$0.00	0	D	

Explanation of Responses:

- The vesting of the restricted stock units occurred upon April 27, 2017 upon the consummation of the merger transaction contemplated by the Agreement and Plan of Merger, dated January 6, 2017, by and among Mast Therapeutics, Inc., Savara Inc., and Victoria Merger Corp. (the "Merger Agreement") but due to an administrative error was not reported at that time, and the shares were omitted from subsequent Form 4 filings.
- Each restricted stock unit represents a contingent right to receive one share of the issuer's common stock. The amount reported reflects the 70-for-one reverse stock split implemented by the issuer on April 27, 2017.
- The restricted stock units vested in full on April 27, 2017, upon consummation of the merger transaction contemplated by the Merger Agreement.

Remarks:

/s/ David Lowrance as attorney-in-fact for David A. Ramsay 06/19/2019

** 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.