FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL									
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	Check this box if no longer subject to
ì	Section 16. Form 4 or Form 5
J	obligations may continue. See
	Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Anish Bhatnagar					2. Issuer Name <b>and</b> Ticker or Trading Symbol SOLENO THERAPEUTICS INC [ SLNO ]								5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Own				
(Last) (First) (Middle) 1235 RADIO ROAD, SUITE 110					3. Date of Earliest Transaction (Month/Day/Year) 02/07/2018								below)	Officer (give title pelow)  President and		Other (specification) CEO	pecify
(Street)  REDWOOD CITY  CA 94065				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(S	tate)	(Zip)		Person												
		Ta	ble I - Non-D	erivati	ve Se	ecurities	s Ac	quired, D	ispo	sed o	f, or Be	neficially	/ Owned				
Dat			Transaction ate Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Dis			ecurities Acquired (A) posed Of (D) (Instr. 3, 4		Securities Beneficia	5. Amount of Securities Beneficially Owned Following		: Direct   II Indirect   E str. 4)   C	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code V	А	Amount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				
	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)		Derivative		6. Date Exercisable Expiration Date (Month/Day/Year)		e and	nd 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expi Date	iration e	Title	Amount or Number of Shares		(Instr. 4)			
Employee stock option (right to buy)	\$1.6	02/07/2018		A		400,000		(1)	02/0	07/2028	Common Stock	400,000	\$0.00	\$0.00 400,000		D	
Restricted Stock Units	(3)	02/07/2018		A		100,625		(2)		(2)	Common Stock	100,625	\$0.00	100,62	25	D	

### **Explanation of Responses:**

- 1. One forty-eighth (1/48) of the shares subject to the Option shall vest on the first month anniversary of February 7, 2018 (the "Vesting Commencement Date"), and one forty-eighth (1/48) of the total number of shares subject to the Option shall vest each month thereafter on the same day of the month as the Vesting Commencement Date (which is February 7, 2018), such that all of the shares subject to the Option will have vested as of the fourth anniversary of the Vesting Commencement Date, subject to Participant continuing to be a Service Provider through each such date.
- 2. One hundred percent (100%) of the restricted stock units shall be deemed vested as of the transaction date (which is February 7, 2018).
- 3. Each Restricted Stock Unit represents a right to receive one share of Soleno Therapeutics, Inc. Common Stock.

#### Remarks:

/s/ Anish Bhatnagar

02/08/2018

\*\* 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.