FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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	Check this box if no longer subject to							
$\neg$	Section 16. Form 4 or Form 5							
$\cup$	obligations may continue. See							
	Instruction 1(b).							

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

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	d Address of <b>Tuneer A</b>		2. Issuer Name and Ticker or Trading Symbol Aerpio Pharmaceuticals, Inc. [ NONE ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Satter iv	<u> Tuneer A</u>	•			-							_			X Dire	ctor		X 10% (	Owner
	(FI		3. Date of Earliest Transaction (Month/Day/Year) 03/15/2017										er (give title w)		Other below	(specify )			
9987 CA	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) CINCINNATI OH 25242															X Forr	Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(City) (State) (Zip)															SOTI			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N						Execution Date,		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				Benefic	ies cially Following	Form (D) o	n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Code	v	Amount (A) or (D)				) or )	Price	Transa	Transaction(s) (Instr. 3 and 4)			(1130.4)					
Common Stock 03/15/20						117		P <sup>(1)</sup>		1,120,000	(1)	A	\$5	3,24	3,241,835(2)			See Footnote <sup>(2)</sup>	
	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)	if any	emed ion Date, /Day/Year)		ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerc tion Da h/Day/\		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Expiration Exercisable Date Title		Title	or	ount nber res								

## **Explanation of Responses:**

- 1. Represents shares acquired by Satter Medical Technology Partners, L.P. in a private placement offering by the Company that occurred immediately following the merger of a wholly-owned subsidiary of the Company with and into Aerpio Therapeutics, Inc.
- 2. The amount in Column 5 includes (a) 980,124 shares that are held by the Muneer A. Satter Revocable Trust for which the Reporting Person serves as trustee and, in such capacity, has sole voting and dispositive power over all such shares, (b) 1,141,711 shares that are held by various other trusts and other entities for which the Reporting Person serves as trustee, investment advisor or manager and, in such capacity, has sole voting and dispositive power over all such shares, and (c) 1,120,000 shares that are held by Satter Medical Technology Partners, L.P. for which the Reporting Person has sole voting and dispositive power over all such shares. The Reporting Person disclaims beneficial ownership of all shares included in clauses (b) and (c) of this footnote (2), except to the extent of his pecuniary interest.

## Remarks:

/s/ Muneer A. Satter

03/17/2017

\*\* 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.