

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person *												5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						RespireRx Pharmaceuticals Inc. [RSPI]						X Director			1	0% Owner		
(Last	(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)						X Officer (g				Other (speci	fy below)	
C/O RESPI	C/O RESPIRERX					6/16/2016						Executive Ch	airma	an a	nd CSO			
PHARMAC VALLEY R			C., 126															
	(St	reet)			4.	If A	mendm	ent, Date (Origin	al Fi	led (MM/I	DD/YYYY)	6. Individual	or Joir	ıt/Gı	roup Filing (Check Appl	icable Line)
GLEN ROCK, NJ 07452											X_Form filed by One Reporting Person Form filed by More than One Reporting Person							
((City) (S	tate) (Z	ip)															
			Table						•				eficially Own				T	
1. Title of Security (Instr. 3)			. Date			3. Trans. Co (Instr. 8)	3. Trans. Code (Instr. 8)		or Disposed of (D) Fo		Amount of Securities Beneficially Owned ollowing Reported Transaction(s) astr. 3 and 4)			Ownership of Indirect	Beneficial			
						Code	v	Amo	(A) c	r Price				or Indirect (I) (Instr. 4)	(Instr. 4)			
	Tal	ble II - Dei	rivative	Securi	ities	Ben	eficiall	y Owned (e.g. ,	, puts	s, calls, v	varrants,	options, conve	rtible	sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative					Derivative		ve Securities I (A) or I of (D)	e Securities (A) or of (D)		ation Date Sec Der		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			Securities Beneficially Owned	Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			С	ode	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares			Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Common Stock Options (to purchase shares of Common Stock)	\$0.025	6/16/2016		J	<u>(1)</u>		:	15000000	<u>(</u>	<u>3)</u>	6/30/2022	Common Stock	15000000	\$0	(1)	0	D	
Common Stock Options (to purchase shares of Common Stock)	\$0.0197	6/16/2016		J	<u>(1)</u>			10000000	Œ	<u>4)</u>	8/18/2022	Common Stock	10000000	\$0	(1)	0	D	
Common Stock Options (to purchase shares of Common Stock)	\$0.0227	6/16/2016		J	<u>(2)</u>			24000000	<u>(</u>	<u>5)</u>	3/31/2021	Common Stock	24000000	\$0	(2)	0	D	

Explanation of Responses:

- (Mr. Lippa transferred these Common Stock Options into a family trust for estate planning purposes. He is not the trustee and does not exercise voting or
- 1) investment control over shares held in the trust but he is a beneficiary of the trust.
- (Mr. Lippa transferred 14,000,000 of these Common Stock Options into the family trust described above in Footnote 1. He transferred the remaining
- 2) 10,000,000 into another family trust of which he is neither the trustee nor the beneficiary.
- (These Common Stock Options vest in three installments: 50 percent on June 30, 2015, 25 percent on September 30, 2015, and 25 percent on December 31,
- 3) 2015, and are all currently vested and exercisable.
- (These Common Stock Options vest in four equal installments: 25 percent on December 31, 2015, 25 percent on March 31, 2016, 25 percent on June 30, 2016,
- 4) and 25 percent on September 30, 2016.
- (These Common Stock Options vest in four equal installments: 25 percent on March 31, 2016 (the grant date), 25 percent on June 30, 2016, 25 percent on
- 5) September 30, 2016, and 25 percent on December 31, 2016.

Reporting Owners

Penarting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director 10% Owner Officer	Other			

Lippa Arnold C/O RESPIRERX PHARMACEUTICALS INC. 126 VALLEY ROAD, SUITE C GLEN ROCK, NJ 07452	X	Executive Chairman and CSO	
---	---	----------------------------	--

Signatures

/s/ Arnold Lippa	6/20/2016
** 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 control number.