FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

X 10% Owner

Other (specify below)

7. Nature of

Indirect

Beneficial

Ownership (Instr. 4)

11. Nature of Indirect

Beneficial

Ownership (Instr. 4)

5. Relationship of Reporting Person(s) to Issuer

6. Individual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting

6. Ownership Form: Direct

(D) or Indirect (I) (Instr. 4)

 $D^{(3)(4)}$ 

10. Ownership

Direct (D)

or Indirect

(I) (Instr. 4)

**D**(3)

Form:

(Check all applicable)

Director

5. Amount of Securities

Beneficially

Owned Following Reported

813,433(2)

9. Number of derivative

Securities

Following Reported Transaction(s)

(Instr. 4)

187,500

Owned

Beneficially

Transaction(s) (Instr. 3 and 4)

Officer (give title

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

	(-)						tion 30(h)										
1. Name and Address of Reporting Person*  DOMAIN PARTERS VII L P						2. Issuer Name and Ticker or Trading Symbol OBALON THERAPEUTICS INC [ OBLN ]											ationship k all applic Directo
(Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC 202 CARNEGIE CENTER, SUITE 104					3. Date of Earliest Transaction (Month/Day/Year) 08/06/2019											Officer below)	
(Street) PRINCETON NJ 08540				_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or 3 Line)  Form f  X  Form f  Persor				
(City)	(S	itate)	(Zip)														
		Та	ble I - Nor	n-Der	rivati	ve Se	ecurities	s Ac	qu	ıired, D	isp	osed o	f, oı	r Ben	nefic	ially	Owned
Dat				Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transact Code (In 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4					5. Amou Securitie Benefici Owned F Reporte
										Code	,	Amount		(A) or (D)		ice	Transac (Instr. 3
Common	Stock		Table II - I	<u> </u>	/06/20 		urities	Aca	uir	red. Dis	spo	250,0 sed of.		A Bene		54 <sup>(1)</sup> ==== .IIv O	wned
	1						ls, warr						ble s	secui	rities	5)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	·	4. Transa Code ( 8)		5. Number Derivative Securities Acquired or Dispos of (D) (In: 3, 4 and 9	e s I (A) sed str.	Ex	Date Exer spiration D lonth/Day/		of Secu Underly Derivati				8. Price of Derivative Security (Instr. 5)	
					Code	v	(A)	(D)		ate Ex xercisable Da		xpiration ate Tit			Amount or Number of Shares		
Warrants to Purchase Common Stock	\$4.4	08/06/2019			P		187,500		08	08/06/2019 08/0		3/06/2024	Common Stock		187,500		\$4 <sup>(1)</sup>
		Reporting Person*															
		(First) OCIATES, LLC ENTER, SUITE		e)													
(Street) PRINCE	TON	NJ	08540	)													
(City)		(State)	(Zip)														
	nd Address of R JAMES	Reporting Person*															
		(First) OCIATES, LLC ENTER, SUITE		e)													
(Street) PRINCE	TON	NJ	08540	0													
(City)		(State)	(Zip)														
	nd Address of Y BRIAN	Reporting Person*  NH															
(Last)	MAIN ASS	(First)	(Middle	e)													

202 CARNEGIE	CENTER, SUITE 104								
(Street) PRINCETON	NJ	08540							
(City)	(State)	(Zip)							
1. Name and Address of Reporting Person*  TREU JESSE I									
(Last) C/O DOMAIN AS 202 CARNEGIE (	(Middle)								
(Street) PRINCETON	NJ	08540							
(City)	(State)	(Zip)							
1. Name and Address VITULLO NIC  (Last) C/O DOMAIN AS 202 CARNEGIE (	(Middle)								
(Street) PRINCETON	NJ	08540							
(City)	(State)	(Zip)							
1. Name and Address of Reporting Person*									
	(Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC 202 CARNEGIE CENTER, SUITE 104								
(Street) PRINCETON	NJ	08540							
(City)	(State)	(Zip)							

## Explanation of Responses:

- 1. The reported securities were purchased as Units, each Unit consisting of one share of Common Stock and a Warrant to purchase 0.75 of one share of Common Stock, at a purchase price of \$4.00 per Unit.
- $2. \ The \ reported \ ownership \ reflects \ the \ one-for-ten \ reverse \ split \ of \ the \ Common \ Stock \ effected \ on \ July \ 24, \ 2019.$
- 3. The securities reported as directly beneficially owned by the designated Reporting Person may be deemed to be indirectly beneficially owned by each of the Reporting Owners listed below, each of whom is a managing member of One Palmer Square Associates VII, LLC, the sole general partner of the designated Reporting Person. Pursuant to Instruction 4(b)(iv) of Form 4, each such individual has elected to report as indirectly beneficially owned the entire number of securities owned by the designated Reporting Person, however each of them disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his or her pecuniary interest therein and/or that are not actually distributed to him or her.
- 4. As managing members of One Palmer Square Associates VII, LLC, which is also the sole general partner of DP VII Associates, L.P., each Reporting Owner listed below may also be deemed to indirectly beneficially own 4,957 shares of Common Stock held by DP VII Associates, L.P.

## Remarks:

/s/ Lisa A. Kraeutler, as
Attorney-in-Fact for Domain
Partners VII, L.P., J. Blair, B.
Dovey, J. Treu, N. Vitullo and
B. Halak

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.