FORM 4

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

Washington, D.C. 20549

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

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

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*     Luthringer Remy						2. Issuer Name and Ticker or Trading Symbol  Minerva Neurosciences, Inc. [ NERV ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last)	,	rst) (	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/14/2016								X	Officer (give title below)  President		Other (specify below)		
1601 TRAPELO ROAD, SUITE 284							4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
(Street) WALTHAM MA 02451														Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(S	tate) (	Zip)																
		Tab	le I - N	on-Deriv	ative S	Sec	urities	Acc	quired, [	Disp	osed o	f, or Be	neficial	y Owne	t				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution Date,			Transaction Dispose Code (Instr. and 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4		Securiti Benefic Owned	es ially	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) c	Price	Followi Reporte Transac (Instr. 3	ed etion(s)	(Instr. 4)		Instr. 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)	Execution Date,		4. Transaction Code (Instr. 8)		on of		6. Date Exercisable a Expiration Date (Month/Day/Year)		е	d 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount or Number of Shares						
Restricted Stock Unit	(1)	12/14/2016			A		75,000		(2)	T	(2)	Common Stock	75,000	\$0.00	75,000	0	D		
Stock Option (Right to Buy)	\$13.45 <sup>(3)</sup>	12/14/2016			A		150,000		(4)	1	2/13/2026	Common Stock	150,000	\$0.00	150,00	00	D		

## Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock
- 2. Represents shares issuable upon the vesting of restricted stock units ("RSUs") awarded to the Reporting Person on December 14, 2016. The RSUs vest in 4 equal annual installments beginning on December 14, 2017 and will be fully vested on December 14, 2020, in all cases so long as there has been no break in the Reporting Person's continuous service through such date.
- 3. The exercise price is the closing price of the Issuer's common stock on December 14, 2016.
- $4. \ This \ option \ shall \ vest \ as \ follows: 25\% \ on \ December \ 14, \ 2017 \ and \ then \ in \ quarterly \ installments \ over \ 3 \ years \ thereafter.$

## Remarks:

/s/ Mark Levine, Attorney-in-Fact

\*\* Signature of Reporting Person

12/16/2016

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.