FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

r	<	H	5	Αľ	٧L	ノヒス	CH	AN	GE	CU	IVIIVII	55	IC
				_	_								

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

IIISII UC	uon ro.																	
	nd Address of Robert Ch		2. Issuer Name and Ticker or Trading Symbol CASSAVA SCIENCES INC [SAVA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner									
(Last) (First) (Middle) 6801 N CAPITAL OF TEXAS HWY, BLDG 1 SUITE 300						3. Date of Earliest Transaction (Month/Day/Year) 09/06/2024							Officer (give title Other (specify below) SVP & General Counsel					
(Street) AUSTIN TX 78731 (City) (State) (Zip)			78731 (Zip)	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Trans. Date						action 2A. Deemed Execution Date, if any (Month/Day/Year) 3. Transaction Code (Instr. 8) 2. Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) (A) or			red (A) or str. 3, 4 an	5. Amor Securiti Benefic Owned Reporte Transac	5. Amount of Securities Form Beneficially (D) of		: Direct I r Indirect I str. 4) (7. Nature of ndirect Beneficial Ownership 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price o Derivative Security (Instr. 5)	derivativ Securitie Beneficia Owned Followin Reported	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Share	s	Transact (Instr. 4)	ion(s)			
Stock Option (Right to Buy)	\$26.91	09/06/2024		A		100,000		(1)		09/06/2034	Common Stock	100,00	0 \$0	100,0	00	D		

Explanation of Responses:

1. The stock option vests over 2 years, with 50% cliff vesting 1-year after grant date and the remaining 50% cliff vesting 2-years after grant date.

/s/ Eric J. Schoen by Power of <u>Attorney</u>

09/09/2024

** Signature of Reporting Person

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.