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

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

Novartis Bioventures Ltd				Tok	2. Issuer Name and Ticker or Trading Symbol Tokai Pharmaceuticals Inc [TKAI]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner						
(Last) (First) (Middle) 131 FRONT STREET					16/12/2015						Offic belov	er (give title w)		Other (specify below)						
	TVI STREE				4. If A	Ame	endmei	nt, Date	of Origina	I File	d (Month/D	ay/Y	ear)		. Individ ine)	lual c	or Joint/Grou	p Filing (Ch	eck /	Applicable
(Street) HAMILT	ON DO) F	IM 12												X		i filed by One i filed by Mor on			
(City)	(St	ate) (Z	Zip)																	
		Tabl		on-Deriv						Dis	1					wne	ed			
1. Title of Security (Instr. 3)			- 1	2. Transact Date (Month/Day		2A. Deen Execution if any (Month/E		n Date,	3. Transaction Code (Instr. 8)				es Acquired (A) Of (D) (Instr. 3,		4 Secur		icially d	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Pric	e F	Repor rans		(Instr. 4)		(Instr. 4)
Common	Stock			06/12/2	015				S		5,919		D	\$1	4.2	4,5	61,393	D ⁽¹⁾		
Common	Stock			06/15/2	014				S		14,77	7	D	\$1	4.2	4,5	46,616	D ⁽¹⁾		
		Та		· Derivati (e.g., pι						•					-	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. Transac Code (I 8)		on of Der Sec (A) Dis of (In:	posed	6. Date I Expirati (Month/	on Da		Ame Sec Und Der Sec	itle and ount of urities lerlying ivative urity (Ir nd 4)	ı	8. Prio of Deriva Secur (Instr.	ative ity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins 4)	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code		/ (A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	ount mber ares						
		f Reporting Person	•	,																
(Last) 131 FRO	NT STREE	(First)	(Mid	idle)																
(Street) HAMILT	ON	D0	HM	1 12																
(City)		(State)	(Zip)																

1	and Address of Reporting Person* ARTIS AG								
(Last) LICHTSTRA	(First) SSE 35	(Middle)							
(Street)			_						
BASEL	V8	4056							
(City)	(State)	(Zip)							

Explanation of Responses:

1. These shares are directly owned by Novartis BioVentures Ltd. Novartis BioVentures Ltd. is a wholly-owned indirect subsidiary of Novartis AG, which is an indirect beneficial owner of the reported securities.

Remarks:

/s/ Laurieann Chaikowsky,
Authorized Signatory and /s/
Simon Zivi, Director of
Novartis Bio Ventures Ltd.
/s/ Simon Zivi, by Power of
Attorney on behalf of Novartis
AG and /s/ David Middleton,
by Power of Attorney on
behalf of Novartis AG
** Signature of Reporting Person Date

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

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.

^{*} 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).