Calithera Biosciences, Inc.

Form 4 May 03, 2016

### FORM 4

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

OMB Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Form 4 or Form 5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Calithera Biosciences, Inc. [CALA]

3. Date of Earliest Transaction

4. If Amendment, Date Original

Filed(Month/Day/Year)

**SECURITIES** 

1(b).

(Print or Type Responses)

obligations

may continue.

See Instruction

1. Name and Address of Reporting Person \*

Orford Keith

(Last)

**SOUTH SAN** 

Security (Instr. 3) (First)

(Middle)

(Month/Day/Year) 05/02/2016

Symbol

C/O CALITHERA BIOSCIENCES. INC., 343 OYSTER POINT BLVD. #200

(Street)

(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Expires:

response...

Estimated average

burden hours per

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

Director 10% Owner \_X\_\_ Officer (give title Other (specify

below) below)

SR. VP, CLINICAL DEVELOPMENT

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

FRANCISCO, CA 94080

(City) (State) 1. Title of 2. Transaction Date 2A. Deemed

(Zip)

3. 4. Securities

Execution Date, if Code (Month/Day/Year)

(Instr. 8)

TransactionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)

Securities Beneficially Owned Following

Transaction(s)

Reported

5. Amount of

(I) (Instr. 4)

6. Ownership

Form: Direct

7. Nature of Indirect (D) or Indirect Beneficial Ownership

(9-02)

(Instr. 4)

(A) or

(Instr. 3 and 4) Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: Calithera Biosciences, Inc. - Form 4

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. Transactic Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 5.33	05/02/2016		A	5,000	<u>(1)</u>	05/01/2026	Common Stock	5,000

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Orford Keith C/O CALITHERA BIOSCIENCES, INC. 343 OYSTER POINT BLVD. #200 SOUTH SAN FRANCISCO, CA 94080

SR. VP, CLINICAL DEVELOPMENT

De Sec (In

#### **Signatures**

Keith Orford 05/03/2016

\*\*Signature of Person

\*\*Bignature of Date

## **Explanation of Responses:**

- \* 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).
- One-fourth (1/4th) of the Option vests one year after May 2, 2016; the balance of the Option vests in a series of thirty-six (36) successive equal monthly installments thereafter. The Option shall be subject to accelerated vesting as set forth in the optionee's employment agreement with the Company.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2