

Kindred Biosciences, Inc.  
Form 3  
December 11, 2013

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2015  
Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â GALLIKER STEPHEN S</p> <p>(Last) (First) (Middle)</p> <p>C/O KINDRED BIOSCIENCES, INC.,Â 1499 BAYSHORE HIGHWAY, SUITE 226</p> <p>(Street)</p> <p>BURLINGAME,Â CAÂ 94010</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>12/11/2013</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>Kindred Biosciences, Inc. [KIN]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Chief Financial Officer</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
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**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	65,773	I	By Equity Trust Company Custodian FBO "Stephen Galliker" IRA <sup>(1)</sup>

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

SEC 1473 (7-02)

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**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial Ownership
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	(Month/Day/Year)		Derivative Security (Instr. 4)		or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Stock Option (right to buy) <sup>(2)</sup>	Â <sup>(3)</sup>	09/12/2023	Common Stock	25,000	\$ 1.37	D	Â
Stock Option (right to buy) <sup>(2)</sup>	Â <sup>(4)</sup>	11/09/2023	Common Stock	25,000	\$ 3.83	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GALLIKER STEPHEN S C/O KINDRED BIOSCIENCES, INC. 1499 BAYSHORE HIGHWAY, SUITE 226 BURLINGAME, CA 94010	Â	Â	Â Chief Financial Officer	Â

## Signatures

/s/ Stephen Galliker  
12/11/2013

<sup>\*\*</sup>Signature of Reporting Person                      Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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).
- (1) Held by Equity Trust Company Custodian FBO "Stephen Galliker" IRA. The Reporting Person has sole voting and dispositive power over the shares.
  - (2) Granted pursuant to the Issuer's 2012 Equity Incentive Plan
    - 8,334 of the shares subject to the option vested on September 11, 2014, with the remaining shares vesting in equal monthly installments over the ensuing 24 months, subject to the Reporting Person's continued employment with the Issuer through the applicable vesting dates.
  - (4) 6,250 of the shares subject to the option vested on November 9, 2014, with the remaining shares vesting in equal monthly installments over the ensuing 36 months, subject to the Reporting Person's continued employment with the Issuer through the applicable vesting dates.

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.