

Calithera Biosciences, Inc.  
Form 3  
October 01, 2014

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

OMB APPROVAL

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**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)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Christophersen Ralph E		(Month/Day/Year)	Calithera Biosciences, Inc. [CALA]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
2710 SAND HILL ROAD,		10/01/2014		
SUITE 100			(Check all applicable)	
(Street)			<input checked="" type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
MENLO PARK, Â CA Â 94025			<input type="checkbox"/> Officer	<input type="checkbox"/> Other
(City)	(State)	(Zip)	(give title below)	(specify below)
			6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

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

SEC 1473 (7-02)

**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 control number.**

**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 (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

(Instr. 5)

SERIES A PREFERRED STOCK	Â (1)	Â (1)	COMMON STOCK	10,999	\$ (1)	I	By Partnership (2)
SERIES B PREFERRED STOCK	Â (1)	Â (1)	COMMON STOCK	419,181	\$ (1)	I	By Partnership (2)
SERIES C PREFERRED STOCK	Â (1)	Â (1)	COMMON STOCK	747,540	\$ (1)	I	By Partnership (2)
SERIES D PREFERRED STOCK	Â (1)	Â (1)	COMMON STOCK	634,195	\$ (1)	I	By Partnership (2)

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Christoffersen Ralph E 2710 SAND HILL ROAD, SUITE 100 MENLO PARK, CA 94025	Â X	Â	Â	Â

## Signatures

/s/ Ralph E.  
Christoffersen

10/01/2014

\*\*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) The Series A Preferred Stock, Series B Preferred Stock, Series C Preferred Stock and Series D Preferred Stock shall automatically convert into Common Stock on a one-for-one basis immediately upon the consummation of Issuer's initial public offering of Common Stock and have no expiration date.

(2) The securities are held by Morgenthaler Venture Partners IX, L.P. (MVP IX). The managing partner of MVP IX is Morgenthaler Management Partners IX, LLC (MMP IX). Ralph E. Christoffersen, a director of the Issuer is a Member of MMP IX. As such, the Reporting Person shares voting and investment power over the securities held by MMP IX. The Reporting Person disclaims beneficial ownership of the securities held by MMP IX except to the extent of his pecuniary interest therein.

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.