Edgar Filing: Viking Therapeutics, Inc. - Form 4

•	rapeutics, Inc.										
Form 4	2016										
March 08, 2								OMB A	APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0287		
	this box		VV č	isinington	, D.C. 2	J J 49		Number: Expires:	January 31,		
if no los subject Section	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated burden ho					
Form 4 Form 5 obligati may co <i>See</i> Inst 1(b).	Filed put ons Section 17((a) of the l	Public U	Jtility Hol	lding Co		nge Act of 1934, of 1935 or Sectio 940	response	0.5		
(Print or Type	e Responses)										
1. Name and Address of Reporting Person <u>*</u> Hanley Rochelle			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle			Viking Therapeutics, Inc. [VKT2 3. Date of Earliest Transaction				(Check all applicable)				
C/O VIKI	NG THERAPEUT 40 EL CAMINO F	TICS,		Day/Year)	Tansaction		Director X Officer (giv below) Chief		% Owner her (specify cer		
(Street)			4. If Amendment, Date Original			al	6. Individual or Joint/Group Filing(Check				
			Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
SAN DIEC	GO, CA 92130						Person	viore man one i	ceporting		
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	cquired, Disposed o	f, or Beneficia	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactic Code (Instr. 8) Code V	Disposed	(A) or of (D)	SecuritiesIBeneficially(Owned(6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Re	eport on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly o	or indirectly.				
					inforı requi	nation cont red to respo ays a curre	spond to the collect ained in this form ond unless the for ntly valid OMB cor	are not m	SEC 1474 (9-02)		
	Tab					sposed of, or convertible s	Beneficially Owned securities)				
		saction Date /Day/Year)			4. Transact	5. Number iorDerivative			7. Title and Amount of Underlying Securities		

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Security (Instr. 3)	5		y Ionth/Day/Year	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)				
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share			
Stock Option (Right to Buy)	\$ 2.15	03/04/2016		А	35,250	03/04/2017 <u>(1)</u>	03/04/2026	Common Stock	35,250			
Reporting Owners												
Reporting Owner Name / Address			R	elationships								
		Director 1	10% Owner Officer Other									
Hanley Rochelle C/O VIKING THERAPEUTICS, INC. 12340 EL CAMINO REAL, SUITE 250 SAN DIEGO, CA 92130		Chief Medical Officer										
Signa	tures											
/s/ Michael Morneau, as Attorney-in-Fact		03/08/2	2016									
<u>**</u> Sig	gnature of Reportin	g Person	Date	•								
Expla	nation of	of Respons	ses:									

* 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).

(1) 25% of the shares subject to the option will vest on each anniversary of the grant date.

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.