ELMS STEVE Form 3/A April 12, 2018

FORM 3

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

OMB APPROVAL

OMB Number:

3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

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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

response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person *

A Aisling Capital IV, LP

(Last) (First) (Middle)

(Month/Day/Year)

03/29/2018

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Zosano Pharma Corp [ZSAN]

888 SEVENTH AVENUE, 12TH

FLOOR,Â

(Street)

Statement

4. Relationship of Reporting

Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

04/09/2018

(Check all applicable)

Director Officer

_X__ 10% Owner Other (give title below) (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)

Form filed by One Reporting

Person

X Form filed by More than One

Reporting Person

NEW YORK, NYÂ 10106

(City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security

(Instr. 4)

2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership Form:

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Direct (D) or Indirect

(I) (Instr. 5)

Common Stock, par value of \$0.0001 1,600,000

 $D^{(1)}$

SEC 1473 (7-02)

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

> 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)

Conversion or Exercise Price of

Ownership Form of Derivative Security:

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Title

Derivative Security

Direct (D)

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Date Expiration Amount or or Indirect
Exercisable Date Number of (I)
Shares (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships			
reprining 0 miles state (state of		10% Owner	Officer	Other
Aisling Capital IV, LP 888 SEVENTH AVENUE, 12TH FLOOR NEW YORK, NY 10106	Â	ÂX	Â	Â
Aisling Capital Partners IV, LP 888 SEVENTH AVE., 12TH FLOOR NEW YORK, NY 10106	Â	ÂX	Â	Â
Aisling Capital Partners IV LLC 888 SEVENTH AVE., 12TH FLOOR NEW YORK, NY 10106	Â	ÂX	Â	Â
ELMS STEVE C/O AISLING CAPITAL MANAGEMENT LP 888 SEVENTH AVE., 12TH FLOOR NEW YORK, NY 10106	Â	ÂX	Â	Â
SCHIFF ANDREW N C/O AISLING CAPITAL MANAGEMENT LP 888 SEVENTH AVE., 12TH FLOOR NEW YORK, NY 10106	Â	ÂX	Â	Â

Signatures

See Signatures on Exhibit 99.1 04/12/2018

**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).

The securities are directly held by Aisling Capital IV, LP ("Aisling"), and may be deemed to be benefically owned by Aisling Capital Partners IV, LP ("Aisling GP"), as general partner of Aisling, Aisling Capital Partners IV LLC ("Aisling Partners"), as general partner of Aisling GP, and each of the individual managing members and partners (collectively, the "Managers") of Aisling GP and Aisling Partners. The Managers of Aisling Partners are Dr. Andrew Schiff and Steve Elms.

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Remarks:

This amendment is being filed solely to add Aisling GP and Aisling Partners as reporting persons 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.

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