#### Zosano Pharma Corp Form 3 January 26, 2015 UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB APPROVAL** FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, Expires:

### **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 <u>*</u> Steel Bruce D.			<ol> <li>Date of Event Requiring Statement (Month/Day/Year)</li> </ol>	<sup>g</sup> 3. Issuer Name <b>and</b> Ticker or Trading Symbol Zosano Pharma Corp [ZSAN]				
(Last)	(First)	(Middle)	01/26/2015	4. Relationshi Person(s) to I	p of Reporting	g	5. If Amendment, Date Original Filed(Month/Day/Year)	
C/O ZOSAN	NO PHARI	MA						
CORPORATION, 34790				(Check all applicable)				
ARDENTECH COURT				_X_ Director	X Director 10% Owner			
(Street) FREMONT, CA 94555			OfficerOther				6. Individual or Joint/Group	
				(give title below	v) (specify bel	ow)	Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)	Table I - N	Non-Derivative Securities Beneficially Owned				
1.Title of Secu (Instr. 4)	rity		2. Amount o Beneficially		3. Ownership		ture of Indirect Beneficial ership	

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

(Instr. 4)

SEC 1473 (7-02)

Form:

Direct (D) or Indirect (I) (Instr. 5)

(Instr. 5)

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	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

2005

0.5

Estimated average burden hours per

response...

Shares	or Indirect
	(I)
	(Instr. 5)

#### (I) (Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Steel Bruce D. C/O ZOSANO PHARMA CORPORATION 34790 ARDENTECH COURT FREMONT, CA 94555	ÂX	Â	Â	Â		
Signatures						
/s/ Robert W. Sweet, Jr., Attorney-in-Fact for Steel	•	01/26/2015				
**Signature of Reporting Person		Date				
Explanation of Responses:						

## No securities are beneficially owned

\* 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).

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.