FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL											
	OMB Number: 3235-0											
l	Estimated average burden											
l	hours per response:	0.5										

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  PROFUSEK ROBERT							2. Issuer Name <b>and</b> Ticker or Trading Symbol Kodiak Sciences Inc. [ KOD ]								5. Relationship of Reporting Person(s) to Is Check all applicable) X Director 10% C			o Issuer 6 Owner	
(Last) (First) (Middle) 2631 HANOVER STREET						3. Date of Earliest Transaction (Month/Day/Year) 10/09/2018									Offic belo	er (give title w)		er (specify ow)	
(Street) PALO ALTO CA 94304 (City) (State) (Zip)					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Lin	Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - Nor	-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,			Code (Instr. 5)					d Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		
						Code	v	Amount	Amount (A		Price	Trans	action(s) 3 and 4)		(Instr. 4)				
Common Stock 10/09/							2018		P		10,000 A		Α	\$10	) 1	0,000	D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Date,	Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber					

**Explanation of Responses:** 

Remarks:

/s/ Barbara A. Mery, Attorney-10/09/2018 in-fact for Robert Profusek

\*\* Signature of Reporting Person

Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.