

Protagonist Therapeutics, Inc
Form 3
August 10, 2016

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 *

JOHNSON & JOHNSON

(Last) (First) (Middle)

ONE JOHNSON & JOHNSON
PLAZA

(Street)

NEW
BRUNSWICK, NJ 08933

(City) (State) (Zip)

2. Date of Event Requiring Statement

(Month/Day/Year)

08/10/2016

3. Issuer Name and Ticker or Trading Symbol
Protagonist Therapeutics, Inc [PTGX]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original Filed(Month/Day/Year)

(Check all applicable)

____ Director ____X____ 10% Owner
____ Officer ____ 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

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)

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)

Date Exercisable

Expiration Date

3. Title and Amount of Securities Underlying Derivative Security
(Instr. 4)

Title

Amount or Number of Shares

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)

(Instr. 5)

Series B Preferred Stock	Â (1)	Â (1)	Common Stock	965,517 (1)	\$ (1)	I	By Johnson & Johnson Innovation - JJDC, Inc. (2)
Series C Preferred Stock	Â (1)	Â (1)	Common Stock	900,333 (1)	\$ (1)	I	By Johnson & Johnson Innovation - JJDC, Inc. (2)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
JOHNSON & JOHNSON ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK,Â NJÂ 08933	Â	Â X	Â	Â
Johnson & Johnson Innovation - JJDC, Inc. ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK,Â NJÂ 08933	Â	Â X	Â	Â

Signatures

Thomas Spellman III, Secretary of Johnson & Johnson	08/10/2016
____Signature of Reporting Person	Date
Steven M. Rosenberg, Secretary of Johnson & Johnson Innovation - JJDC, Inc.	08/10/2016
____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).

- Pursuant to a reverse stock split, each share of the Issuer's Series B Preferred Stock and Series C Preferred Stock (the "Preferred Stock") is convertible into the Issuer's Common Stock on a 1-for-14.5 basis. The Preferred Stock has no expiration date. The number of
- (1) underlying shares of Common Stock reported in Column 3 reflects the 1-for-14.5 reverse stock split pursuant to which every 14.5 shares of Preferred Stock will convert into one share of Common Stock, effective upon the closing of the Issuer's initial public offering, for no additional consideration.
- (2) The securities reported as being indirectly beneficially owned by the designated Reporting Person are directly beneficially owned by Johnson & Johnson Innovation - JJDC, Inc., a wholly-owned subsidiary of the designated Reporting Person.

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.