SEC Form 3

FORM 3

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

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 [*] Forward V Associates LLC			2. Date of Event Requiring Statement (Month/Day/Year) 03/07/2017		3. Issuer Name and Ticker or Trading Symbol Capnia, Inc. [CAPN]					
(Last) (First) (Middle)		4. Relationship of Reporting Pers (Check all applicable)					5. If Amendment, Date of Original Filed (Month/Day/Year)			
4747 EXECUTIVE DRIVE, SUITE 700							Director X Officer (give title below)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One		
(Street) SAN DIEGO CA 92121							20.011)			
(City)	(State)	(Zip)						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)		
Common Stock					7,173,976(1)	Ι	See F		Footnote ⁽²⁾	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4) Expiration Da (Month/Day/Ye			ate	d 3. Title and Amount of Secur Underlying Derivative Secur 4)	rity (Instr. Conver or			5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Date Exercisable				Expiration Date	n Title	Amount or Number of Shares	Exercise Price of Derivative Security		Direct (D) or Indirect (I) (Instr. 5)	
1. Name and Address of Reporting Person [*] Forward V Associates LLC										
(Last) 4747 EXECU	(First) TIVE DRIVE,	(Mide SUITE 700	le)							
(Street)										
SAN DIEGO CA 92121			21							
(City)	(State)	(Zip)								
1. Name and Ad	dress of Reporti D VENTU	0								
(Last) (First) (Middle) 4747 EXECUTIVE DRIVE, SUITE 700										
(Street) SAN DIEGO	CA	921	21							
(City)	(State)	(Zip)								

Explanation of Responses:

1. The reporting person(s) acquired these securities on March 7, 2017, as consideration for the reporting person(s) common stock of Essentialis, Inc. ("Essentialis"), which was acquired by the Issuer, through a merger of a wholly-owned subsidiary of Issuer with and into Essentialis on March 7, 2017 pursuant to the Agreement and Plan of Merger dated December 22, 2016, by and between the Issuer, Merger Sub (as defined in the Merger Agreement), Essentialis and the Stockholders Representative (as defined therein) (the "Merger Agreement") and a related private placement closing concurrently with the merger transaction. 2. The shares are held directly by Forward Ventures V LP ("Forward V"). The Reporting Person is the sole general partner of Forward V, and may be deemed to beneficially own such shares. The Reporting Person holds voting and dispositive power with respect to the securities held by Forward V. Standish Fleming and Ivor Royston are the managing members of the Reporting Person and Each disclaim beneficial ownership of the securities held by Forward V except to the extent of any pecuniary interest therein. **Remarks:**

/s/ Standish Fleming, as Managing Member of Forward 03/09/2017 V Associates LLC /s/ Standish Fleming, as Managing Member of Forward V Associates LLC, the sole 03/09/2017 general partner of Forward Ventures V LP ** Signature of Reporting Person Date

eignataie er repetting r

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 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.

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.