FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	JVAL
	OMB Number:	3235-0287
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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* <u>TAKEYA RYAN K</u>						2. Issuer Name and Ticker or Trading Symbol Celladon Corp [CLDN] 3. Date of Earliest Transaction (Month/Day/Year) 12/01/2014								neck all app Dired	ionship of Reporting F all applicable) Director		Person(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) 11988 EL CAMINO REAL, SUITE 650					X below									er (give title v) VP, Man	ufact	below)	:pecпу	
(Street) SAN DIEGO CA 92130				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. I Lin	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person					
(City)			(Zip)		-										filed by Moi	•	Ü	
		Tab	ole I - No	n-Deri	vativ	e Se	curit	ties Ac	quired,	, Dis	sposed o	f, or Be	neficia	lly Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		Code (I	3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3, Code (Instr. 3)				5) Secur Benet Owne	cially I Following	es Form ally (D) of Following (I) (II		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		ed ction(s) 3 and 4)			(Instr. 4)
Common Stock 12/01/2				/2014	2014		M		7,777	A	\$1.1	2 8	8,354(3)		D			
Common Stock 12/01/2			/2014	2014		S ⁽¹⁾		7,777	D	\$12.01	(2)	577(3)		D				
		-	Table II								osed of, convertil			/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	n Date,	4. Transa Code (8)		on of I		Expiration	5. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				c	Code	v	(A)	(D)	Date Exercisab	able	Expiration Date	Title	Amount or Number of Shares	per				
Stock option (right to	\$1.12	12/01/2014			M			7,777	01/27/201	3 ⁽⁴⁾	06/14/2022	Common Stock	7,777	\$0.00	95,34	19	D	

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 plan adopted by the reporting person.
- 2. The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$11.81 to \$12.29 per share, inclusive. The reporting person undertakes to provide to Celladon Corporation, any security holder of Celladon Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.
- 3. The amount includes shares purchased under Celladon's employee stock purchase plan prior to the reported transaction.
- 4. 25% of the shares subject to the option vested and became exercisable on the one year anniversary of January 27, 2012 (the "Vesting Commencement Date"), and 1/48th of the shares vest in equal monthly installments thereafter, over the remaining three years.

Remarks:

/s/ Rebecque J. Laba, Attorney-12/02/2014 in-Fact

** 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.