FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHA	NGFS IN	IBENEFI	CIAL	OWNE

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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]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last)	(Fi	rst)	(Middle)			Date of Earliest Transaction (Month/Day/Year)							_	X	Officer (give title below)			Other (s below)	pecify	
11988 EL CAMINO REAL, SUITE 650				03/	03/02/2015								VP, Manufacturing							
(Street)					- 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)								3. Indiv Line)	Individual or Joint/Group Filing (Check Applicable ne)					
SAN DII	EGO CA	A	92130											X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(St	tate)	(Zip)												Person		e ulali	One Repor	ung	
		Tab	ole I - No	on-Deri	vativ	e Se	curit	ties Ac	quired	Dis	sposed o	f, or Be	nefici	ially	Owned					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)				Execution Date,		Code (I	Transaction Disposed Of (D) (Instr. 3, 2)		I (A) or : 3, 4 an	I and 5) Securitie Benefici Owned F		es Form ally (D) of Following (I) (Ir		r Indirect rstr. 4)	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	ction(s)			(Instr. 4)			
Common Stock 03/02/2				2/2015	2015		M		7,777	A	\$1.	.12	9,2	209(1)		D				
Common Stock 03/02/2			2/2015	2015		S ⁽²⁾		7,777	D	\$18.	1,4		432 ⁽¹⁾		D					
		-	Table II								osed of, convertil				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transa Code (8)		on of E		Expiration	s. Date Exercisabl Expiration Date Month/Day/Year)		Amount of		D S (I	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	is Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab	le	Expiration Date	Title	Amou or Numb of Share	er						
Stock option (right to	\$1.12	03/02/2015			M			7,777	01/27/201	3 ⁽⁴⁾	06/14/2022	Common Stock	7,77	7	\$0.00	144,01	8	D		

Explanation of Responses:

- 1. The amount includes shares purchased under Celladon Corporation's employee stock purchase plan prior to the reported transaction.
- 2. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 plan adopted by the reporting person.
- 3. The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$18.23 to \$18.60 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.
- 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- 03/03/2015 in-Fact

** Signature of Reporting Person

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.