Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person* Malley Thomas | | | | | | 2. Issuer Name and Ticker or Trading Symbol Kura Oncology, Inc. [KURA] | | | | | | | of Reporting cable) or | g Pers | son(s) to Issi 10% Ow | | | |
|--|---|--------------------|--|------------|---|--|--------|--|---|---|---|---|--|--------|--|--|--|--|
| (Last) | (F ONCOLOG | , | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/12/2016 | | | | | | | Officer below) | (give title | | Other (s below) | pecify | | |
| 11119 N. TORREY PINES ROAD, SUITE 125 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | EGO C. | A | 92037 | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tab | le I - Non-I | Derivat | ive S | ecuritie | s Ac | quired, D | isposed | of, or Be | neficia | ly Owned | ı | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | 2A. Deem Execution if any (Month/D | n Date | Code (Ins | Transaction Disposed Of (D) Code (Instr. 5) | | es Acquired (A) or Of (D) (Instr. 3, 4 and | | 5. Amount of Securities Beneficially Owned Following Reported | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code V | Amoun | (A) o | r Price | Transaci (Instr. 3 | tion(s) | | | (Instr. 4) | | |
| | | - | Fable II - De | | | | | uired, Dis s, options | | | | Owned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | e (Month/Day/Year) | 3A. Deemed Execution Dat if any (Month/Day/Ye | Code (Inst | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Cod | le V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | | |
| Option to purchase common stock | \$3.12 | 05/12/2016 | | А | | 10,000 | | (1) | 05/11/2026 | Common | 10,000 | \$0.00 | 10,000 | 0 | D | | | |

Explanation of Responses:

1. This option vests in full on the one year anniversary of the date of grant.

Remarks:

Annette North, Attorney-in-fact for Thomas Malley 05/13/2016

** 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.