FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasiiiigtoii,	D.C. 20349	

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response 0.5

1. Name and Address of Reporting Person* LADD CYNTHIA J (Last) (First) (Middle) 343 OYSTER POINT BLVD. SUITE 100				<u>C</u>	Issuer Name and Ticker or Trading Symbol CytomX Therapeutics, Inc. [CTMX] 3. Date of Earliest Transaction (Month/Day/Year) 07/21/2015									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Senior VP and General Counsel					
(Street) SOUTH FRANCE	ISCO C	A state)	94080 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ind Line)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Ta	ble I - Nor	-Deri	vativ	ve Se	curities	s Ac	quired,	Dis	posed c	of, or Be	nefic	cially	Owned				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		r, Transaction Dispose Code (Instr. 5)		ities Acquii d Of (D) (In	red (A) str. 3,	or 4 and	5. Amoun Securities Beneficial Owned Fo	illy	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										v	Amount	(A) (r P	rice	Reported Transaction (Instr. 3 au	ion(s)			(Instr. 4)
Common	Stock			10/1	14/20	15			P		3,00	0 A	\top	\$12	3,0	00	D		
			Table II - I						uired, D s, optior			,		•	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/)	ite, T	4. Fransa Code (1 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				C	Code	v	(A)	(D)	Date Exercisab		expiration Date	Title	Amo or Num of SI			(Instr. 4)	ion(s)		
Employee Stock Option (right to buy)	\$6.6147	07/21/2015			A		246,043		(1)	0	7/20/2025	Common Stock	246	5,043	\$0	246,043		D	
Employee Stock Option (right to buy)	\$6.6147	08/26/2015			A		27,393		(2)	0	8/25/2025	Common Stock	27,	393	\$0	27,39)3	D	

Explanation of Responses:

1. This option vests 25% on June 15, 2016, and the remaining 75% vests in 36 substantially equal monthly installments thereafter, with each additional installment vesting on the last day the month, except the final installment, which shall vest on June 15, 2019.

2. This option vests in 48 substantially equal monthly installments starting on August 28, 2015, with each additional installment vesting on the last day of the month.

Remarks:

Exhibit 24.1 - Power of Attorney (incorporated by reference to the Power of Attorney filed as Exhibit 24.1 to the Form 3 filed by the reporting person on October 7, 2015)

/s/ Cynthia J. Ladd, attorney-in-

10/16/2015

Date

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.