FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasnington,	D.C.	20049

STATEMENT	OF CHANGES	S IN BENEFI	CIAL OWNERS	SHIP

OMB APPROVAL							
OMB Number: 3235-028							
Estimated average burden							
hours per response:							

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* Mordwinkin Nicholas Michael					2. Issuer Name and Ticker or Trading Symbol Kezar Life Sciences, Inc. [KZR]						(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last)	`	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/07/2024						X	X Officer (give title below) Other (below) Chief Business Officer				Decity	
C/O KEZAR LIFE SCIENCES, INC. 4000 SHORELINE COURT, SUITE 300				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SOUTH FRANCI	<i>(</i> '	A	94080			121 -					X		led by Mor		ting Person One Reporti	ing	
(City)	(S	tate)	(Zip)	-	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									satisfy			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date			2. Transaction Date Month/Day/	Execution Date,		Code (Instr.		ed (A) or tr. 3, 4 and 5	5. Amount Securities Beneficially Owned Foll Reported		Form:	n: Direct II r Indirect E sstr. 4) C	7. Nature of ndirect Beneficial Dwnership				
								Code V	Amount	(A) o (D)	r Price	Transacti (Instr. 3 a	on(s)			(Instr. 4)	
			Table II - De	erivative	Sec s, cal	urities ls, warr	Acq ants	uired, Dis , options,	posed of converti	or Bend ble secu	eficially (irities)	Owned					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise (Instr. 3) Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year)		Code	ransaction Derivative ode (Instr. Securities		6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and of Securitie Underlying Derivative (Instr. 3 and		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Employee Stock Option (right to buy)	\$0.93	01/07/2024		A		275,000		(1)	01/06/2034	Common Stock	275,000	\$0.00	275,00	00	D		

Explanation of Responses:

1. One forty-eighth (1/48th) of the shares shall vest on a monthly basis commencing on January 7, 2024, subject to the Reporting Person continuing to provide service through each such date.

Remarks:

/s/ Marc Belsky, Attorney-in-Fact 01/09/2024

** 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.