

| OMB APPROVAL                                 |           |
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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

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|--|---|--|--|
| 1. Name and Address of Reporting Person*<br><u>SRB Associates IX L.P.</u><br><hr/> (Last) (First) (Middle)<br>13455 NOEL ROAD, SUITE 1670<br><hr/> (Street)<br>DALLAS TX 75240<br><hr/> (City) (State) (Zip) | 2. Date of Event Requiring Statement (Month/Day/Year)<br>05/07/2014 | 3. Issuer Name and Ticker or Trading Symbol<br><u>ALDER BIOPHARMACEUTICALS INC [ ALDR ]</u>  |  |
|  |   | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable)<br>Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/><br>Officer (give title below) <input type="checkbox"/> Other (specify below) <input type="checkbox"/> | 5. If Amendment, Date of Original Filed (Month/Day/Year)<br><hr/> 6. Individual or Joint/Group Filing (Check Applicable Line)<br><input type="checkbox"/> Form filed by One Reporting Person<br><input checked="" type="checkbox"/> Form filed by More than One Reporting Person |

**Table I - Non-Derivative Securities Beneficially Owned**

| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---------------------------------|---|--|---|
|---------------------------------|---|--|---|

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) |                 | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) |                            | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|-----------------|---|----------------------------|--|--|---|
|  | Date Exercisable   | Expiration Date | Title   | Amount or Number of Shares |  |  |   |
| Series B Preferred Stock                   | (I)  | (I)             | Common Stock  | 2,220,196                  | (I)  | I  | See Footnote <sup>(2)</sup>                           |
| Series A Preferred Stock                   | (I)  | (I)             | Common Stock  | 1,773,736                  | (I)  | I  | See Footnote <sup>(3)</sup>                           |
| Series C Preferred Stock                   | (I)  | (I)             | Common Stock  | 925,925                    | (I)  | I  | See Footnote <sup>(4)</sup>                           |
| Series D Preferred Stock                   | (I)  | (I)             | Common Stock  | 265,117                    | (I)  | I  | See Footnote <sup>(5)</sup>                           |

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| 1. Name and Address of Reporting Person*<br><u>SRB Associates IX L.P.</u><br><hr/> (Last) (First) (Middle)<br>13455 NOEL ROAD, SUITE 1670<br><hr/> (Street)<br>DALLAS TX 75240<br><hr/> (City) (State) (Zip) |
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|--|
| 1. Name and Address of Reporting Person*<br><u>Sevin Rosen Fund IX L.P.</u><br><hr/> (Last) (First) (Middle)<br>13455 NOEL ROAD, SUITE 1670<br><hr/> (Street)<br>DALLAS TX 75240<br><hr/> (City) (State) (Zip) |
|--|

1. Name and Address of Reporting Person\*

Sevin Rosen IX Affiliates Fund L.P.

(Last) (First) (Middle)

13455 NOEL ROAD, SUITE 1670

(Street)

DALLAS TX 75240

(City) (State) (Zip)

**Explanation of Responses:**

1. Each share of Series A Preferred Stock, Series B Preferred Stock, Series C Preferred Stock and Series D Preferred Stock automatically converts into Common Stock on a 1-for- 5.5 basis immediately prior to the closing of the Issuer's initial public offering of common stock and has no expiration date.
2. Total Series A Preferred shares of 2,220,196 represents 2,176,903 shares owned directly by Sevin Rosen Fund IX L.P. ("SRFIX") 43,293 shares owned directly by Sevin Rosen IX Affiliates Fund L.P. ("SRIX AFF"). SRB Associates IX L.P. ("SRBAIX") is the general partner of SRFIX and SRIX AFF, and in that capacity has shared voting and dispositive power over such shares. SRBAIX disclaims beneficial ownership of such shares except to the extent of its pecuniary interest.
3. Total Series B Preferred shares of 1,773,736 represents 1,739,149 shares owned directly by SRFIX 34,587 shares owned directly by SRIX AFF. SRBAIX is the general partner of SRFIX and SRIX AFF, and in that capacity has shared voting and dispositive power over such shares. SRBAIX disclaims beneficial ownership of such shares except to the extent of its pecuniary interest.
4. Total Series C Preferred shares of 925,925 represents 907,870 shares owned directly by SRFIX and 18,055 shares owned directly by SRIX AFF. SRBAIX is the general partner of SRFIX and SRIX AFF, and in that capacity has shared voting and dispositive power over such shares. SRBAIX disclaims beneficial ownership of such shares except to the extent of its pecuniary interest.
5. Total Series D Preferred shares of 265,117 represents 259,948 shares owned directly by SRFIX and 5,169 shares owned directly by SRIX AFF. SRBAIX is the general partner of SRFIX and SRIX AFF, and in that capacity has shared voting and dispositive power over such shares. SRBAIX disclaims beneficial ownership of such shares except to the extent of its pecuniary interest.

John V. Jagers, As Attorney-  
In-Fact For SRB Associates IX 05/07/2014  
L.P.

John V. Jagers, As Attorney-  
In-Fact For Sevin Rosen Fund 05/07/2014  
IX L.P.

John V. Jagers, As Attorney-  
In-Fact For Sevin Rosen IX 05/07/2014  
Affiliates Fund L.P.

\*\* 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 5 (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.**