FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL             |                       |  |  |  |  |  |  |
|--------------------------|-----------------------|--|--|--|--|--|--|
| OMB Number:              | DMB Number: 3235-0104 |  |  |  |  |  |  |
| Estimated average burden |                       |  |  |  |  |  |  |
| hours per response       | e: 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

| Gangolli Julian S   | Date of Event equiring Stateme Month/Day/Year) 3/01/2019       | ent 1 | 3. Issuer Name and Ticker or Trading Symbol  Krystal Biotech, Inc. [ KRYS ] |   |                                    |   |   |  |  |  |
|---|--|-------|---|---|------------------------------------|---|---|--|--|--|
| (Last) (First) (Middle) C/O KRYSTAL BIOTECH, INC.   |  |       | Relationship of Reporting Pe (Check all applicable)     X Director          | rson(s) to Issue  | (Mc                                | 5. If Amendment, Date of Original Filed (Month/Day/Year)  |   |  |  |  |
| 2100 WHARTON STREET, SUITE 701  |  |       | Officer (give title below)  | Other (spe  | App                                | 6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person |   |  |  |  |
| (Street) PITTSBURGH PA 15203  |  |       |   |   |                                    | -   | y More than One   |  |  |  |
| (City) (State) (Zip)  |  |       |   |   |                                    |   |   |  |  |  |
| Table I - Non-Derivative Securities Beneficially Owned  |  |       |   |   |                                    |   |   |  |  |  |
| 1. Title of Security (Instr. 4)   |  |       | 2. Amount of Securities<br>Beneficially Owned (Instr. 4)                    | 3. Ownersh<br>Form: Direct<br>or Indirect<br>(Instr. 5) | ct (D) (Inst                       | 4. Nature of Indirect Beneficial Ownership<br>(Instr. 5)  |   |  |  |  |
| Table II - Derivative Securities Beneficially Owned<br>(e.g., puts, calls, warrants, options, convertible securities) |  |       |   |   |                                    |   |   |  |  |  |
| 1. Title of Derivative Security (Instr. 4)  | 2. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |       | 3. Title and Amount of Securities<br>Underlying Derivative Security (Instr  |   | 4.<br>Conversion<br>or Exercise    | 5.<br>Ownership<br>Form:  | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |  |  |  |
|   | Date Expiratio   |       | n<br>Title  | Amount<br>or<br>Number<br>of<br>Shares                  | Price of<br>Derivative<br>Security | Direct (D)<br>or Indirect<br>(I) (Instr. 5)   |   |  |  |  |

**Explanation of Responses:** 

## Remarks:

No securities are beneficially owned.

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/s/ Julian S. Gangolli 03/06/2019

\*\* 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.