## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFI	CIAL OWN	IERSHIP

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

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*  VON RICKENBACH JOSEF H						2. Issuer Name and Ticker or Trading Symbol AILERON THERAPEUTICS INC [ ALRN ]									all app Direc	olicable) ctor		Owner
	ERON TH	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)  08/30/2019  Officer (give title below)  Other (specify below)													
490 ARSENAL WAY, SUITE 210  (Street)  WATERTOWN MA 02472  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	lividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
		Tal	ole I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefic	cially	Owne	ed		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/					Execution Date,		3. 4. Securities Acquir Transaction Code (Instr. 8) 4. Securities Acquir Disposed Of (D) (Ins			ed (A) or tr. 3, 4 ar	nd 5)	Secur Benef Owne	icially d Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	Ownership			
								Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 08/30/20				2019	.9		P		15,000	A	\$0.7	312(1)	e	58,352	D			
Common Stock 09/03/20				2019	)19		P		13,466	A	\$0.7	001(2)	8	31,818	D			
		7	able II								osed of, convertib				vned			
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)		if any	emed tion Date, In/Day/Year)  4. Transac Code (I		nstr.	5. Nu of Deriv Secul Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	6. Date Exer Expiration D (Month/Day/		ate Year)	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of		Derir Secu (Inst		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	

### **Explanation of Responses:**

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$0.7155 per share to \$0.75 per share, inclusive. The Reporting Person undertakes to provide the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 2. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$0.6805 per share to \$0.7204 per share, inclusive. The Reporting Person undertakes to provide the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

# Remarks:

/s/ Richard J. Wanstall, attorney-in-fact for Josef H.

09/04/2019

von Rickenbach

\*\* 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.