Edgar Filing: Sheehy Douglas T. - Form 4

Sheehy Doug Form 4	glas T.										
January 26, 2	2018										
FORM	14								OMB AF	PPROVAL	
	UNITE) STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check the if no long							Expires:	January 31, 2005			
subject to Section 1 Form 4 o	F CHANGES IN BENEFICIAL OWN SECURITIES					NERSHIP OF	Estimated average burden hours per response				
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17	7(a) of the	Public U		ling Con	npan	y Act of	e Act of 1934, 7 1935 or Section 0	n		
(Print or Type I	Responses)										
1. Name and A Sheehy Dou	2. Issuer Name and Ticker or Trading Symbol Aimmune Therapeutics, Inc. [AIMT]					5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Check all applicable)			
AIMMUNE INC., 8000	THERAPEUT	ICS,	(Month/D 01/24/20	ay/Year)	ansaction			Director X Officer (give below)		Owner er (specify	
			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
BRISBANE	E, CA 94005-18	84						Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Dat (Month/Day/Year)		r) Executio any	Execution Date, if		(A)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
C				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock, \$0.0001 par value	01/24/2018			М	1,875	A	\$ 19.63	1,875	D		
Common Stock, \$0.0001 par value	01/24/2018			S <u>(1)</u>	1,875	D	\$ 38.15	0	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Dei Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 19.63	01/24/2018		М	1,875	(2)	02/24/2027	Common Stock	1,875	

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	ionships Officer See Remarks	Other		
Sheehy Douglas T. AIMMUNE THERAPEUTICS, INC. 8000 MARINA BOULEVARD, SUITE 300 BRISBANE, CA 94005-1884			See Remarks			
Signatures						
/s/ Douglas T.						

01/26/2018 Sheehy **Signature of Date Reporting Person

Explanation of Responses:

- 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).
- (1) This sale reported in the Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by Reporting Person.

The shares subject to the option will vest and become exercisable as to one-forty-eighth (1/48th) of the total number of shares subject to (2) the option in successive, equal monthly installments measured from February 24, 2017, subject to the Reporting Person's continued service relationship with the Issuer on each such vesting date.

Remarks:

General Counsel and Corporate Secretary

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.