Sheehy Douglas T. Form 4 February 07, 2018

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

if no longer subject to Section 16. Form 4 or Form 5

Check this box

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Middle)

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Sheehy Douglas T. Issuer Symbol

Aimmune Therapeutics, Inc. [AIMT]

3. Date of Earliest Transaction

(Month/Day/Year)

02/05/2018

AIMMUNE THERAPEUTICS. INC., 8000 MARINA **BOULEVARD, SUITE 300** 

BRISBANE CA 94005-1884

(First)

(Street)

4. If Amendment, Date Original

Filed(Month/Day/Year)

(Check all applicable)

Director 10% Owner Other (specify X\_ Officer (give title below)

See Remarks

**OMB APPROVAL** 

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

6. Individual or Joint/Group Filing(Check

Applicable Line) \_X\_ Form filed by One Reporting Person

Form filed by More than One Reporting

DIGIODI II IL, C	71 7 1005 10	0.1	Person
(C:+-)	(0, , )	(7:-)	

(City)	(State)	Table Table	e I - Non-D	erivative	Securi	ities Acqı	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transactio Code (Instr. 8)	on(A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Form: Direct Beneficially (D) or Owned Indirect (I) Following (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock, \$0.0001 par value	02/05/2018		M	1,648	A	\$ 12.95	1,648	D	
Common Stock, \$0.0001 par value	02/05/2018		S <u>(1)</u>	1,648	D	\$ 35.87	0	D	

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

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SEC 1474 (9-02)

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)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and A Underlying S (Instr. 3 and	ecurities
				Code V	(Instr. 3, and 5)	4, D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option(right to buy)	\$ 12.95	02/05/2018		M	1,6	648	(2)	04/29/2026	Common Stock	1,648

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Sheehy Douglas T. AIMMUNE THERAPEUTICS, INC. 8000 MARINA BOULEVARD, SUITE 300 BRISBANE, CA 94005-1884

See Remarks

## **Signatures**

/s/ Douglas T.

Sheehy 02/07/2018

\*\*Signature of Pate Person

Date

# **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 25% of the total number of shares subject to the option on April 4, (2) 2017 and with respect to 1/48th of the total number of shares subject to the option in successive, equal monthly installments on each monthly anniversary thereafter, subject to the Reporting Person's continued service relationship with the Issuer on each such vesting date

Reporting Owners 2

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#### **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.