Rozenman Mary M. Form 4 March 05, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

January 31, Expires: 2005

OMB APPROVAL

Estimated average 0.5

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5. Relationship of Reporting Person(s) to

Section 16. Form 4 or Form 5 obligations may continue.

See Instruction

Check this box

if no longer

subject to

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

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

Rozenman Mary M.			Symbol Aimmune Therapeutics, Inc. [AIMT]					Issuer (Check all applicable)			
(Last) AIMMUNE INC., 8000 I BOULEVAL	3. Date of Earliest Transaction (Month/Day/Year) 03/01/2018					DirectorX Officer (give below)	10%	Owner er (specify			
	(Street) 4. If Ame Filed(Mon				U	ıl		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BRISBANE, CA 94005-1884								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	le I - Non-D	erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	r) Execution	med on Date, if Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock, \$0.0001 par value	03/01/2018			M	1,807	A	\$ 3.022	1,936	D		
Common Stock, \$0.0001 par value	03/01/2018			S <u>(1)</u>	1,807	D	\$ 33.1	129	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)

> 8. I De Sec (In

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 out of 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 3.022	03/01/2018		M	1,807	(2)	04/17/2025	Common Stock	1,807

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Rozenman Mary M.

AIMMUNE THERAPEUTICS, INC. 8000 MARINA BOULEVARD, SUITE 300

See Remarks

BRISBANE, CA 94005-1884

Signatures

/s/ Douglas T. Sheehy, as Attorney-in-Fact for Mary M. Rozenman

03/05/2018

**Signature of Reporting 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) The sales reported in the Form 4 were effected pursuant to a Rule 10b5 1 trading plan adopted by the Reporting Person.
- The option is immediately exercisable in full or in part. The shares vest pursuant to the following schedule: Twenty Five Percent (25%) of the shares subject to the option vest on the first anniversary measured from February 1, 2015 (the "Vesting Commencement Date") and the remaining shares subject to the option vest in 36 successive, equal monthly installments thereafter on each monthly anniversary of the Vesting Commencement Date, subject to Reporting Person's continued service relationship with the Issuer on each such vesting date.

Reporting Owners 2

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Remarks:

Senior VP, Corporate Development and Strategy

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.