FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

washington, D.C. 20	J

UMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					or	Secti	on 30(n) c	or the	Investment	Con	ірапу Аст	of 1940							
1. Name and Address of Reporting Person* Bronstein Ben									ker or Trad			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
DIOISIEII DEII				1			-				X	Directo	r		10% Ov	vner			
(Last) (First) (Middle) C/O ALDEYRA THERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 06/07/2018									Officer (give title Other (specification) below)					
			1110.		1														
131 HARTWELL AVENUE						f Ame	endment, I	Date	of Original I	iled	(Month/Da	6. Individual or Joint/Group Filing (Check Applicable							
					1		·		Ü		`	Line)							
(Street)					1									X	Form fi	led by One	Repo	orting Perso	n
LEXINGTON MA 02421												Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																
		Tab	le I - Non	-Deriva	ative	e Se	curities	s Ac	quired,	Disp	osed o	f, or Be	nefic	ially	/ Owned				
1. Title of Security (Instr. 3) 2. Transa							2A. Deemed		3.		4. Securities Acquired (A)			or	5. Amour	nt of	6. Ov	nership	7. Nature
Date				Date (Month/D	av/Ve	,,,	Execution Date,		Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4			4 and Securitie				n: Direct or Indirect	of Indirect Beneficial
				(MOIIII/D	ayric	ay/Year) if any (Month/Day/Yea					3)	5)			Owned F	ollowing (i) (l		nstr. 4)	Ownership
							Code	v	Amount	(A) o	r _{Pri}	ice	Reported Transacti (Instr. 3 a	tion(s)			(Instr. 4)		
		-	Table II - D	Derivat	ive	Sec	urities	Acq	uired, D	spc	sed of,	or Ben	eficia	ally	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 Dat if any (Month/Day/Yo	ate, Ti	4. Transac Code (II		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				С	ode	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amo or Num of Shar	ber					
Employee Stock Option (Right to Buy)	\$8.35	06/07/2018			A		15,526		(1)	0	6/06/2028	Common Stock	15,5	526	\$0.00	15,520	6	D	
Employee Stock Option (Right to Buy)	\$8.35	06/07/2018			A		1,354		(2)	0	6/06/2028	Common Stock	1,3	54	\$0.00	1,354	,	D	
Employee Stock Option (Right to	\$8.35	06/07/2018			A		903		(3)	0	6/06/2028	Common Stock	90	3	\$0.00	903		D	

Explanation of Responses:

- 1. Exercisable with respect to 100% of the shares on the one-year anniversary of the grant date, provided that the Reporting Person provides continuous service as a member of the Board of Directors of the Issuer through the applicable vesting date.
- 2. Exercisable with respect to 100% of the shares on the one-year anniversary of the grant date, provided that the Reporting Person provides continuous service as a member of the Audit Committee of the Board of Directors of the Issuer through the applicable vesting date.
- 3. Exercisable with respect to 100% of the shares on the one-year anniversary of the grant date, provided that the Reporting Person provides continuous service as a member of the Compensation Committee of the Board of Directors of the Issuer through the applicable vesting date.

Remarks:

/s/ Ben Bronstein

** Signature of Reporting Person

06/08/2018

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.