## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*  Bronstein Ben  (Last) (First) (Middle)  C/O ALDEYRA THERAPEUTICS, INC.  131 HARTWELL AVENUE  (Street)  LEXINGTON MA 02421						Date 0/04/2	of Earliest	Tran:	ker or Tradiceutics, Ir saction (Mor	nth/Da	ALDX ay/Year)	(C	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner  Officer (give title Other (specify below)  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting					
(City) (State)			(Zip)			Person												
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D					ay/Year) 2A. Dee Executii if any (Month/I			ed Date	3. Transac Code (Ir 8)	tion istr.	4. Securities Acquire n Disposed Of (D) (Inst		ed (A) or tr. 3, 4 and	5. Amou Securitie Beneficie Owned Feportec Transact (Instr. 3 a	nt of sally following d ion(s)	6. Owne Form: D (D) or In (I) (Instr	Direct on direct of the first o	7. Nature of Indirect Beneficial Ownership (Instr. 4)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	ate, Tr	4. Transaction Code (Instr.		5. Number		6. Date Exercisal Expiration Date (Month/Day/Year		of Sec ur) Under		d Amount es g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersi Form: Direct (E or Indire (I) (Instr.	wnership	Beneficial Ownership ct (Instr. 4)
				C	ode	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares					
Employee Stock Option (Right to Buy)	\$7.06	06/04/2019			A		18,951		(1)	06	5/03/2029	Common Stock	18,951	\$0.00	18,951		D	
Employee Stock Option (Right to Buy)	\$7.06	06/04/2019			A		1,653		(2)	06	5/03/2029	Common Stock	1,653	\$0.00	1,653		D	
Employee Stock Option (Right to	\$7.06	06/04/2019			A		1,102		(3)	06	5/03/2029	Common Stock	1,102	\$0.00	1,102		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

06/06/2019

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.