# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**WASHINGTON, D.C. 20549** 

SCHED	TIT E	124	$\sim /\Lambda$
SCHEL	JULE	1.51	T//T

Under the Securities Exchange Act of 1934 (Amendment No. 4)\*

# Aldeyra Therapeutics, Inc.

(Name of Issuer)

Common Stock, \$0.001 par value per share (Title of Class of Securities)

**01438T 10 6** (CUSIP Number)

December 31, 2019 (Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

☐ Rule 13d-1(b)

☐ Rule 13d-1(c)

☐ Rule 13d-1(d)

\* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

1	NAMES OF REPORTING PERSONS I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)				
	Perceptive Advisors LLC				
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS)  (a)   (b)   (c)   (d)   (e)   (f)   (e)   (f)   (f)   (f)   (f)   (f)   (g)   (g)				
	` ,	. ,			
3	SEC USE ONLY				
4					
4	CITIZENSHIP OR PLACE OF ORGANIZATION				
	Delaware 5 SOLE VOTING POWER				
		3			
NUMBER OF		6	0 SHARED VOTING POWER		
	ARES FICIALLY	0	SHAKED VOTING FOWER		
	NED BY		3,085,458		
	ACH ORTING	7	SOLE DISPOSITIVE POWER		
	RSON		0		
WITH:		8	SHARED DISPOSITIVE POWER		
			3,085,458		
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON				
	3,085,458				
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS)				
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9				
	11.0%				
12	TYPE OF	REPOI	RTING PERSON (SEE INSTRUCTIONS)		
	IA				
<u> </u>					

1	NAMES OF REPORTING PERSONS				
	I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)				
	Joseph E				
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS)  (a) □ (b) □				
	(a) 🗆	(0)			
3	SEC USE ONLY				
4	CITIZENSHIP OR PLACE OF ORGANIZATION				
	United States of America				
	Officed 5	5	SOLE VOTING POWER		
NUMBER OF SHARES		6	0 SHARED VOTING POWER		
_	FICIALLY				
	NED BY ACH	7	3,085,458 SOLE DISPOSITIVE POWER		
REPO	ORTING	/	SOLE DISPOSITIVE POWER		
	RSON 'ITH:		0		
	1111.	8	SHARED DISPOSITIVE POWER		
			3,085,458		
9	AGGREGA	ATE AI	MOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON		
	3,085,458				
10	CHECK B	OX IF	THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS)		
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9				
	11.0%				
12	TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)				
	IN				

1	NAMECOL	DEDC	ARTING DED CONC	
1	NAMES OF REPORTING PERSONS I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)			
	1.IX.3. IDEIX	1111102	ATION NOS. OF ADOVE LENSONS (ENTITIES ONET)	
			Sciences Master Fund, Ltd.	
2			ROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS)	
	(a) □ (	b) □		
3	SEC USE C	NII V		
3	SEC USE C	INLI		
4	CITIZENSHIP OR PLACE OF ORGANIZATION			
	CITIZENOIM ON FEMOLE OF GROWNERING IV			
	Cayman Islands			
		5	SOLE VOTING POWER	
	IBER OF	•	0 SHARED VOTING POWER	
	IARES	6	SHARED VOTING POWER	
	FICIALLY NED BY		3,085,458	
	ACH	7	SOLE DISPOSITIVE POWER	
	ORTING			
	RSON VITH:		0	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ИΙΙ Π.	8	SHARED DISPOSITIVE POWER	
			2.005.450	
9	ACCRECA	ΤΕ ΔΙΛ	3,085,458 IOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON	
	AGGREGATE AMOUNT DENEFICIALLY OWNED BY EACH REPORTING PERSON			
	3,085,458			
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS)			
11	PERCENT	OF CL.	ASS REPRESENTED BY AMOUNT IN ROW 9	
	11.0%			
12	TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)			
	CO			

#### Item 1(a). Name of Issuer:

Aldeyra Therapeutics, Inc. (the "Issuer")

#### Item 1(b). Address of Issuer's Principal Executive Offices:

131 Hartwell Avenue, Suite 320, Lexington, MA 02421

#### Item 2(a). Names of Persons Filing:

The names of the persons filing this report (collectively, the "Reporting Persons") are:

Perceptive Advisors LLC ("Perceptive Advisors")
Joseph Edelman ("Mr. Edelman")
Perceptive Life Sciences Master Fund, Ltd. (the "Master Fund")

# Item 2(b). Address of Principal Business Office or, if None, Residence:

The address of the principal business office of each of the Reporting Persons is:

51 Astor Place, 10th Floor New York, NY 10003

#### Item 2(c). <u>Citizenship</u>:

Perceptive Advisors is a Delaware limited liability company Mr. Edelman is a United States citizen The Master Fund is a Cayman Islands corporation

### Item 2(d). <u>Title of Class of Securities</u>:

Common Stock, \$0.001 par value per share ("Common Stock")

#### Item 2(e). CUSIP Number:

01438T 10 6

### Item 3. If this statement is filed pursuant to §§ 240.13d-1(b) or 240.13d-2(b) or (c), check whether the person filing is a:

Not applicable.

#### Item 4. Ownership.

The information required by this item with respect to each Reporting Person is set forth in Rows 5 through 9 and 11 of the cover page to this Schedule 13G. The ownership percentages reported are based on 27,952,937 outstanding shares of Common Stock, as reported in the Issuer's Form 10-Q filed on November 7, 2019.

The Master Fund directly holds 3,085,458 shares of Common Stock. Perceptive Advisors serves as the investment manager to the Master Fund and may be deemed to beneficially own such shares. Mr. Edelman is the managing member of Perceptive Advisors and may be deemed to beneficially own such shares.

#### Item 5. Ownership of Five Percent or Less of a Class.

If this statement is being filed to report the fact that as of the date hereof the Reporting Persons have ceased to be the beneficial owner of more than five percent of the class of securities, check the following  $\Box$ .

#### Item 6. Ownership of More than Five Percent on Behalf of Another Person.

Not applicable.

# Item 7. <u>Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on by the Parent Holding Company or Control Person.</u>

Not applicable.

# Item 8. <u>Identification and Classification of Members of the Group.</u>

Not applicable.

# Item 9. Notice of Dissolution of Group.

Not applicable.

#### Item 10. <u>Certification</u>.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect, other than activities solely in connection with a nomination under § 240.14a-11.

#### **SIGNATURE**

After reasonable inquiry and to the best of its knowledge and belief, each of the undersigned certifies that the information set forth in this statement is true, complete and correct.

Date: February 14, 2020

PERCEPTIVE ADVISORS LLC

By: /s/ Joseph Edelman

Name: Joseph Edelman Title: Managing Member

/s/ Joseph Edelman

JOSEPH EDELMAN

PERCEPTIVE LIFE SCIENCES MASTER FUND, LTD.

By: Perceptive Advisors LLC

By: /s/ Joseph Edelman

Name: Joseph Edelman Title: Managing Member

#### **AGREEMENT**

The persons below hereby agree that the Schedule 13G to which this agreement is attached as an exhibit, as well as all future amendments to such Schedule 13G, shall be filed on behalf of each of them. This agreement is intended to satisfy the requirements of Rule 13d-1(k)(1)(iii) under the Securities Exchange Act of 1934.

Date: February 14, 2020

PERCEPTIVE ADVISORS LLC

By: /s/ Joseph Edelman

Name: Joseph Edelman Title: Managing Member

/s/ Joseph Edelman

JOSEPH EDELMAN

PERCEPTIVE LIFE SCIENCES MASTER FUND, LTD.

By: Perceptive Advisors LLC

By: /s/ Joseph Edelman

Name: Joseph Edelman Title: Managing Member