FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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OMB API	PROVAL
OMB Number:	3235-0287
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0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

## 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

defense	ed to satisfy to e conditions ee Instruction	of Rule																			
1. Name and Address of Reporting Person* Miller-Rich Nancy						2. Issuer Name and Ticker or Trading Symbol Aldeyra Therapeutics, Inc. [ ALDX ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
WITHER-KICH INAUCY																Direc	tor		10% Ov	vner	
(Last) C/O ALI	3. Date of Earliest Transaction (Month/Day/Year) 05/03/2021										Office below	er (give title v)		Other (s below)	specify						
131 HAF	RTWELL	AVEN	NUE			If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) LEXINGTON MA 02421															Line)  Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(	State)	(Z	ip)																	
			Table	I - No	n-Deriva	tive S	Secur	ities	Acq	uired,	Dis	posed of	, or E	ene	ficiall	y Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date						Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired Disposed Of (D) (Instr. 5)						Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	v	Amount	(A) (D)	or P	rice	Transa	ction(s) 3 and 4)			(IIISU. 4)	
Common Stock 05/03/2						.021		<b>P</b> <sup>(1)</sup>		413	A	\$	12.81	81 413		D					
Common Stock 04/12/2							.023			P <sup>(1)</sup>		509	A	\$	10.13	922		D			
			Tab									osed of, convertib				Owne	d		•		
1. Title of Derivative Security (Instr. 3)  2. Conver or Exer Price o Derivat Securit		rcise (Month/Day/Year of tive		3A. Deemed Execution Date, if any (Month/Day/Year)			ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exercion Da Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of erivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	e V (A) (D)		Date Expire		Expiration Date	Number of Title Shares										

## **Explanation of Responses:**

1. The purchases reported herein were executed under the trading discretion of an investment advisor in a managed account, without any instruction from or knowledge of the Reporting Person. The Reporting Person only recently become aware of these transactions

/s/ Nancy Miller-Rich

10/21/2024

\*\* Signature of Reporting Person

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.