FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
1										
	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).

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

Name and Address of Reporting Person*     Shendelman Shoshana					2. Issuer Name <b>and</b> Ticker or Trading Symbol Applied Therapeutics Inc. [ APLT ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SHEHUEHHAH SHUSHAHA							-			-	)	Director		X	10% Ow	ner	
(Last) (First) (Middle)				3.	Date of Earliest Transaction (Month/Day/Year)							Officer ( below)	give title		Other (s below)	pecify	
C/O APPLIED THERAPEUTICS, INC.					05/13/2019							President and CEO					
340 MADISON AVENUE, 19TH FLOOR																	
					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEW YORK NY 10173											X Form filed by One Reporting Person						
											Form filed by More than ( Person				ing		
(City)	(S	tate)	(Zip)									. 0.00					
		Ta	ble I - Non-D	erivati	ve Se	ecurities	s Ac	quired, D	isposed (	of, or Be	neficially	Owned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				е	Execution Date,			e, Transaction Disposed Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		Beneficia Owned Fo	Forn lly (D) o ollowing (I) (Ir		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code V	Amount	(A) o	Price	Reported Transacti (Instr. 3 a	on(s) nd 4)			Instr. 4)	
			Table II - Dei									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. Transaction Code (Instr. 8)		5. Number 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 Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Employee Stock Option (right to buy)	\$10	05/13/2019		A		767,349		(1)	05/12/2029	Common Stock	767,349	\$0.00	767,349		D		

### Explanation of Responses:

1. One-fourth (1/4th) of the shares subject to the Option shall vest on May 13, 2020, and one thirty-sixth (1/36th) of the remaining shares subject to the Option shall vest each month thereafter, subject to the Reporting Person continuing to provide service through each such date.

## Remarks:

/s/ Jason Minio, Attorney-in-

**Fact** 

\*\* Signature of Reporting Person Date

05/15/2019

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.