FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1	OIVID APPROVAL										
	OMB Number:	3235-028									
-	Estimated average b	urdon									

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

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

OMB APPROVAL									
3235-0287									
rden									
0.5									

Name and Address of Reporting Person*     Samar Michael P.						2. Issuer Name and Ticker or Trading Symbol ASSEMBLY BIOSCIENCES, INC. [ ASMB ]									eck all appli Directo	cable) or (give title	ng Per	son(s) to Iss 10% Ov Other (s below)	vner		
(Last)								Date of Earliest Transaction (Month/Day/Year)								SVP, Finance and Bus. Ops, PAO					
C/O ASSEMBLY BIOSCIENCES, INC.						10/01/2019															
11711 N. MERIDIAN STREET, SUITE 310							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) CARMEL IN 46032													- 1	Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting							
(City) (State) (Zip)															Person			ir one repe			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,			Transaction Disposed Code (Instr. 5)			ities Acquired (A) or d Of (D) (Instr. 3, 4 and			5. Amou Securitie Benefici Owned I Reporte	es ally Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount	(A) or (D)		Price	Transac	Transaction(s) (Instr. 3 and 4)			(5 4)		
Common Stock 10/01/							2019				2,500	0 <sup>(1)</sup> A §		\$0.00	20,327(2)			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially 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. Deeme Execution if any (Month/Da	Date,	4. Transactio Code (Inst		n of		6. Date Exercisable Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)		Date Exercisabl		Expiration Date	Title	or Nu of	umber							
Stock Option (right to	\$9.31	10/01/2019			A		5,000		(3)	1	0/01/2029	Commo	<sup>1</sup> 5	,000	\$0.00	5,000		D			

## **Explanation of Responses:**

- 1. Grant of restricted stock units. The restricted stock units vest in four equal installments, assuming continuous service on each vesting date, as follows: October 1, 2020; October 1, 2021; October 1, 2022; and October 1, 2023.
- 2. Includes 827 shares acquired under the Assembly Biosciences, Inc. 2018 Employee Stock Purchase Plan on May 14, 2019.
- 3. Grant of stock options. The stock options vest over four years, assuming continuous service on each vesting date, as follows: 25% shall vest on the first anniversary of the date of grant, October 1, 2020; and the remaining 75% shall vest in 36 approximately equal monthly installments, with the options becoming fully vested on October 1, 2023.

## Remarks:

/s/ John O. Gunderson, as 10/01/2019 Attorney-in-Fact

\*\* Signature of Reporting Person Date

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.