FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasiiiigtoii,	D.C.	20549	

OMB APPROVAL									
OMB Number:	3235-0287								

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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* McHutchison John G					2. Issuer Name and Ticker or Trading Symbol ASSEMBLY BIOSCIENCES, INC. [ASMB]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
] X	Director	10% C		10% Ov	vner		
(Last)	(F	irst)	(Middle)		3.	Date of Earliest Transaction (Month/Day/Year)								_ x	Officer (below)	give title	Other (specify below)		pecify	
C/O ASSEMBLY BIOSCIENCES, INC.					08	08/06/2019								CEO and President						
		N STREET, SU																		
					- 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CARMEL IN 46032														Form filed by One Reporting Person				ı		
					-									Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																	
		Ta	ble I - Non	ı-Deriv	vativ	/e Se	ecurities	s Ac	quired,	Dis	posed o	of, or E	Bene	ficially	Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,		Code (I	Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr.				Beneficia Owned Fo	s lly ollowing	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount (A) or (D)		Price	Reported Transacti (Instr. 3 a	ansaction(s) str. 3 and 4)			(Instr. 4)			
Common Stock 08/				08/06	6/201	6/2019			A		100,000(1)		A	\$0	100	,000		D		
			Table II - I						uired, D , option	•				-	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y		ransa Code (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercise Expiration Date (Month/Day/Yea			7. Title and Amof Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	e C S Illy D O (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	OI N	mount r umber f Shares		Transacti (Instr. 4)				
Stock Option (right to	\$11.86	08/06/2019			A		500,000		(2)	0	8/06/2029	Commo Stock		00,000	\$0	500,00	00	D		

Explanation of Responses:

- 1. Grant of restricted stock units. The restricted stock units vest in three approximately equal installments, assuming continuous service on each vesting date, as follows: August 6, 2020; August 6, 2021; and August 6, 2022.
- 2. Grant of stock options. The stock options vest over three years, assuming continuous service on each vesting date, as follows: one-third will vest on the first anniversary of the date of grant, August 6, 2020; and the remaining two-thirds will vest in 24 approximately equal monthly installments, with the options becoming fully vested on August 6, 2022.

/s/ John O. Gunderson, as 08/08/2019 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.