FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
l	OMB Number:	3235-0287								
l	Estimated average burden									
ı	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

1. Name and Address of Reporting Person* <u>Lopatin Uri A</u>							2. Issuer Name and Ticker or Trading Symbol ASSEMBLY BIOSCIENCES, INC. [ ASMB ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify					
(Last) (First) (Middle) C/O ASSEMBLY BIOSCIENCES, INC. 11711 N. MERIDIAN ST., SUITE 310							of Earliest 018	Trans	action (Mo	nth/D	Day/Year)		below)  Chief Med. Off., VP Res. Dev.							
(Street) CARMEL IN 46032 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
		Tah	ile I - Nor	n-Deriv	vativ	e Se	curities	s Acc	nuired.	Dist	nosed o	f. or Be	neficia	Ilv Owne	-d					
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D					saction	action 2A. D Execu Day/Year) if any		A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			ount of ties cially Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) (D)	Price	Repor Transa (Instr.	action(s) 3 and 4)			(Instr. 4)					
Common Stock 03/29/							2018		A		7,500	(1) A	. \$	) 62	629,151(2)		D			
Common Stock															5,000		I !	By Wife		
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. Deemed Execution D if any (Month/Day/	cate, Transaction					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivativ Security		e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisabl		expiration pate	Title	Amour or Number of Shares	1						
Stock Option (right to	\$49.14	03/29/2018			A		15,000		(3)	0	3/29/2028	Common Stock	15,00	\$0	15,00	00	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: March 29, 2019; March 29, 2020; March 29, 2021; and March 29, 2022.
- 2. Total includes 621,651 shares that are held by the Uri Lopatin Revocable Trust for which the reporting person is the trustee and sole beneficiary. Accordingly, these shares are reported as being held directly by the reporting person.
- 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, March 29, 2019; and the remaining 75% shall vest in 36 equal monthly installments, with the options becoming fully vested on March 29, 2022.

/s/ Elizabeth H. Lacy, as Attorney-in-Fact 03/30/2018

\*\* 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.