## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	•	•	
CTATEMENT	OF CHANGES I	N RENEFICIAL	
JIAILIVILIVI	OI CHANGLOI	IN DEINEI ICIAE	CAMINETIZITIE

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average bu	ırden								
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)

Check this box to indicate that a 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 intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	1011 10.																
Name and Address of Reporting Person*     Symons Julian A.				2. Issuer Name and Ticker or Trading Symbol Aligos Therapeutics, Inc. [ ALGS ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Symon	s Junan <i>P</i>	<u>L.</u>					1	,					Directo			Owner	
(1 oot)	/5	irat\	(Middle)	$^ \vdash$								_	Officer below)	(give title	Othe belov	(specify	
(Last) (First) (Middle) C/O ALIGOS THERAPEUTICS, INC.				3. Date of Earliest Transaction (Month/Day/Year) 09/04/2024							See Remarks						
					07/01/2021												
ONE CORPORATE DRIVE, 2ND FLOOR																	
(Street)			—   4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
SOUTH		Δ	94080										Form f	iled by One F	Reporting Per	son	
FRANCI	SCO		J-1000									Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)	_													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)				tion 2A. Deemed 3. 4. Securities Acquired (A) Execution Date, Transaction Disposed Of (D) (Instr. 3,					or 5. Amount of 6. Ow land Securities Form			7. Nature of Indirect					
Date (Month/D:						Code (Instr. 5)		u. 3, 4 am	Benefici Owned F	ally (D)o	Form: Direct D) or Indirect I) (Instr. 4)	Beneficial Ownership					
			.,   0,			-	(A) an		. T	Reported	d	i) (iii3ti. <del>4</del> )	(Instr. 4)				
				Code V Amount (A) or (D)				Price	Transaction(s) (Instr. 3 and 4)								
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
			(e.g.	, puts,	call	s, warr	ants	, options	, con	vertik	ole secu	ırities)					
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numl	oer	6. Date Exer		e and	7. Title an		8. Price of	9. Number o		11. Nature	
Derivative Security			Code	ransaction of Expiration Date of Securities ode (Instr. Derivative (Month/Day/Year) Underlying					g	Derivative Security	derivative Securities	Ownersh Form:	Beneficial				
(Instr. 3)	Price of Derivative		(Month/Day/Year)	8)	Securities Acquired				Derivative Secu			(Instr. 5)	Beneficially Owned	Direct (D			
	Security				(A) or Disposed						,		Following Reported	(I) (Instr.			
					of (D) (Instr. 3, 4 and 5)							Transaction(s) (Instr. 4)	n(s)				
							Ė					Amount	1				
												or Number					
				Code	v	(A)	(D)	Date Exercisable	Expir Date	iration	Title	of Shares					
Stock																	
Option (Right to Buy)	\$11.74	09/04/2024		A		10,880		(1)	09/04	4/2034	Common Stock	10,880	\$0	10,880	D		
				-	-	1			,				1		-		

## **Explanation of Responses:**

1. 1/48th of the total number of shares vest in forty-eight (48) successive and equal monthly installments measured from September 4, 2024 (the "Vesting Commencement Date"), such that 100% of the shares subject to the option will be fully vested and exercisable on the fourth anniversary of the Vesting Commencement Date, subject to the Reporting Person's continued service through each vesting date.

## Remarks:

Executive Vice President, Chief Scientific Officer

/s/ Lesley Ann Calhoun, as attorney-in fact for Julian A. Symons

09/06/2024

\*\* 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.