FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Quinn Anthony G.					2. Issuer Name and Ticker or Trading Symbol Aeglea BioTherapeutics, Inc. [AGLE]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Relationship of Reporting Person(s) to Issuer (Check all applicable)								
(Last)	(F	irst)		3. Date of Earliest Transaction (Month/Day/Year) 07/18/2018								X X	Director Officer (give title below) President &		nt & (below)	specify				
901 S. MOPAC EXPRESSWAY, SUITE 250					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) AUSTIN TX 78746			-											Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																	_	
			le I - N			_		Acc	quired, Di	sp				_			_			_	
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Exe y/Year) if a		A. Deemed xecution Date, any Month/Day/Year)		Transaction Code (Instr. a		4. Securities Acquired Disposed Of (D) (Instr. and 5)			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	,	Amount	(A) (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)		(.1130. 4)		(111501: 4)		
			Tabl						uired, Dis , options,					Own	ed						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	on Date,	4. Transac Code (I		5. Number of		6. Date Exercisab Expiration Date (Month/Day/Year)		е	7. Title a Amount Securitie Underlyi Derivativ (Instr. 3	of s ng e Securit	o D S	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4)	Beneficial Ownership	ect al hip	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amoun or Numbe of Shares								
Employee Stock Option (right to buy)	\$9.36	07/18/2018			A		300,000		(1)	0.	7/17/2028	Common Stock	300,00	0	\$0	300,000		D			
Employee Stock Option (right to buy)	\$9.36	07/18/2018			A		75,000		(2)	0.	7/17/2028	Common Stock	75,000		\$0	75,00	0	D			
Employee Stock Option (right to buy)	\$9.36	07/18/2018			A		75,000		(3)	0	7/17/2028	Common Stock	75,000		\$0	75,00	0	D			
Employee Stock Option (right to buy)	\$9.36	07/18/2018			A		50,000		(4)	0'	7/17/2028	Common Stock	50,000		\$0	50,00	0	D			

Explanation of Responses:

- 1. The stock option vests and becomes exercisable in 48 equal monthly installments beginning on August 18, 2018, until such time as the option is 100% vested, subject to the continuing employment of the Reporting Person on each vesting date.
- 2. The stock option vests and becomes exercisable contingent upon achievement of certain stock price milestones.
- 3. The stock option vests and becomes exercisable contingent upon achievement of certain product development milestones.
- 4. The stock option vests and becomes exercisable contingent upon achievement of certain regulatory milestones.

/s/ Charles N. York II, by power of attorney

07/20/2018

** 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.