Charles Scott J Form 4 July 28, 2017

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

Washington, D.C. 20549

January 31, Expires: 2005

Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Charles Scott J

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

Aralez Pharmaceuticals Inc. [ARLZ]

(Check all applicable)

(Last)

(First) (Middle) 3. Date of Earliest Transaction

(Month/Day/Year) 07/28/2017

Director 10% Owner X_ Officer (give title Other (specify

Chief Financial Officer

C/O ARALEZ PHARMACEUTICALS INC.,, 7100 WEST CREDIT AVENUE, SUITE

101

(Street)

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

below)

MISSISSAUGA, A6 L5N 0E4

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

3. Transactionr Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

Amount

4. Securities Acquired (A) 5. Amount of Securities Beneficially Owned Following

Ownership Form: Direct (D) or Indirect

Indirect Beneficial Ownership (Instr. 4)

7. Nature of

Code V

Reported (A) Transaction(s)

Price

(I) (Instr. 4)

(Instr. 3 and 4)

Common

par value

Shares, 07/28/2017 without

 $S^{(1)}$

10.804 D

(D)

280,551

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Month/Day/Year)

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SEC 1474 (9-02)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative		e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security	eurity Acquired									Follo
	·			(A) or							Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
			4, and 5)								
									A		
									Amount		
				Date	Expiration		or				
						Exercisable Date	Title Number				
				C 1 W	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Charles Scott J C/O ARALEZ PHARMACEUTICALS INC., 7100 WEST CREDIT AVENUE, SUITE 101 MISSISSAUGA, A6 L5N 0E4

Chief Financial Officer

Signatures

/s/ Eric L. Trachtenberg, attorney-in-fact for Scott J. Charles

07/28/2017

**Signature of Reporting Person

Date

Explanation of Responses:

- 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).

This represents shares sold by the issuer on behalf of the reporting person pursuant to an instruction made in accordance with Rule 10b5-1 for payment of withholding tax liability incurred upon the vesting of 29,000 restricted stock units, which vested on July 27, 2017. 7,284 **(1)** of such restricted stock units were previously granted on July 27, 2015 and 21,716 of such restricted stock units were previously granted on February 12, 2016.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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