FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | UMB APPRO | VAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | | | | |
| l | 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| | | Reporting Person* | | 2. Issuer Name and Ticker or Trading Symbol Alector, Inc. [ALEC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|-------------------|---|--|--|--|------|--|------|-----------------|---|---|---|--|-----------------|--|--|
| SCHELLER RICHARD H | | | | | | | _ | | | | | | X Director | r | | 10% Ow | ner |
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | Officer below) | (give title | | Other (specification) | pecify |
| C/O ALECTOR, INC. | | | | | | 01/01/2020 | | | | | | | | | | | |
| 131 OYS | TER POIN | T BLVD, SUIT | L | | | | | | | | | | | | | | |
| (Chroad) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) SOUTH SAN | | | | | | | | | | | | | X Form fi | led by One | Repo | rting Person | |
| FRANCI | - C | A | 94080 | | | | | | | | | | Form fil Person | | e than | One Report | ing |
| (City) (State) (Zip) | | | (Zip) | | | | | | | | | | | | | | |
| | | Ta | ble I - Non-De | rivati | VA S | Curities | . Δc | auired C |)ien | nsed o | of or Re | neficiall | v Owned | | | | |
| | | | | | | | | - | JISP | | | | 1 | | | 1- | |
| 1. Title of Security (Instr. 3) 2. Tran Date (Month | | | | | | 2A. Deemed Execution Date if any (Month/Day/Yea | | e, Transaction Dispose Code (Instr. | | | rities Acquired (A) o ed Of (D) (Instr. 3, 4 | | Beneficia Owned Fe | s For ally (D) ollowing (I) (| Form: (D) or | rm: Direct or Indirect | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | Code | v | Amount | ount (A) or (D) | | Reported Transacti (Instr. 3 a | ction(s) | | | (Instr. 4) |
| | | | Table II - Der (e.g | | | | | uired, Dis | | | | | Owned | | | , | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Т | | | Amount | 1 | (Instr. 4) | on(s) | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | | piration ate | Title | or Number of Shares | | | | | |
| Stock Option (right to buy) | \$17.23 | 01/01/2020 | | A | | 100,000 | | (1) | 12 | //31/2029 | Common Stock | 100,000 | \$0.00 | 100,00 | 0 | D | |

Explanation of Responses:

1. One forty-eighth (1/48th) of the shares subject to the option shall vest on January 6, 2020, and an additional one forty-eighth (1/48th) of the shares subject to the option shall vest each month thereafter, provided the Reporting Person continues to serve as a consultant under the terms of the consulting agreement between the Reporting Person and the Issuer.

Remarks:

/s/ Stephanie Yonker, attorney-

in-fact

** Signature of Reporting Person Date

01/27/2020

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.