FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF C	CHANGES	IN BENE	FICIAL	OWNERS	HIP
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OMB Number: Estimated average burden hours per response: 0.5

OMB APPROVAL

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*  Paul Robert						2. Issuer Name <b>and</b> Ticker or Trading Symbol Alector, Inc. [ ALEC ]								(Chec	k all ap <sub>l</sub> Dire	olicable)		o Issuer 6 Owner er (specify
(Last) (First) (Middle) C/O ALECTOR, INC. 131 OYSTER POINT BLVD, SUITE 600				3. Date of Earliest Transaction (Month/Day/Year) 02/14/2020								X	X Officer (give title Officer Specify below)  Chief Medical Officer					
(Street) SOUTH SAN FRANCISCO CA 94080  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X	dividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tab	le I - No	on-Deriv	/ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or E	Benefi	cially	Own	ed		
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acqui Disposed Of (D) (In						ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect				
							Code	v	Amount	(A) or (D) Price		е	Reported Transaction(s) (Instr. 3 and 4)			(111341. 4)		
Common Stock 02/14/2				2020	020		S <sup>(1)</sup>		3,000	D \$29		9.07(2)	270,719		D			
Common Stock 02/14/2			2020	020		S <sup>(1)</sup>		7,000	D \$29.74 <sup>(3</sup>		9.74 <sup>(3)</sup>	263,719		D				
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		3A. Dee Executii if any (Month//		4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	rities ired r osed ) : 3, 4	6. Date Expirati (Month)	ion Da Day/Y		7. Title Amour Securi Underl Deriva Securi and 4)	nt of ties ying	Der Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- 1. The sales reported by the Reporting Person were effected pursuant to a Rule 10b5-1 trading plan.
- 2. The sale price reported in column 4 of Table I represents the weighted average sale price of the shares purchased ranging from \$28.45 to \$29.44 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.
- 3. The sale price reported in column 4 of Table I represents the weighted average sale price of the shares purchased ranging from \$29.45 to \$30.06 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.

## Remarks:

/s/ Stephanie Yonker, attorneyin-fact

02/18/2020

\*\* 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.