SEC Form 4
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# FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

Form filed by One Reporting Person

Form filed by More than One Reporting

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Person

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 193	-	Estimated average burden hours per response:	ר 0.5
	or Section 30(h) of the Investment Company Act of 1940	·••		
1. Name and Address of Reporting Person* Randolph Sophia	2. Issuer Name and Ticker or Trading Symbol ALX ONCOLOGY HOLDINGS INC	(Check all applica	,	
	ALXO ]	X Director	10% Owr	ner
(Last) (First) (Middle)		X Officer (g	give title Other (sp below)	cecify
C/O ALX ONCOLOGY HOLDINGS INC. 866 MALCOLM ROAD, SUITE 100	3. Date of Earliest Transaction (Month/Day/Year) 05/10/2021	Chi	ief Medical Officer	
(Street)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joi Line)	int/Group Filing (Check Ap	plicable

BURLINGAME CA 94010 (City) (State) (Zip)

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

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1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Dis Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(1150.4)	(Instr. 4)	
Common Stock	05/10/2021		S <sup>(1)</sup>		1,925	D	<b>\$61.1191</b> <sup>(2)</sup>	191,825	D		
Common Stock	05/10/2021		S <sup>(1)</sup>		4,433	D	<b>\$62.12</b> <sup>(3)</sup>	187,392	D		
Common Stock	05/10/2021		S <sup>(1)</sup>		956	D	<b>\$62.7892</b> <sup>(4)</sup>	186,436	D		
Common Stock	05/10/2021		S <sup>(1)</sup>		73	D	\$64.56	186,363	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of I		6. Date Exerc Expiration Da (Month/Day/Y	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) (Instr. 4)	Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

#### Explanation of Responses:

1. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on January 28, 2021.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$60.61 to \$61.45, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnotes (2) through (4) to this Form 4.

3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$61.64 to \$62.59, inclusive.

4. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$62.64 to \$63.13, inclusive.

## **Remarks:**

## /s/ Peter Garcia, by power of attorney

\*\* Signature of Reporting Person Date

05/11/2021

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.