FORM 4

Check this box if no longer subject

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

<i>N</i> ashington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-0287										
Estimated average burden										
hours per response: 0.										

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person*  Pietzke Steffen  (Last) (First) (Middle)  C/O ALX ONCOLOGY HOLDINGS INC.						2. Issuer Name and Ticker or Trading Symbol ALX ONCOLOGY HOLDINGS INC [ ALXO ]  3. Date of Earliest Transaction (Month/Day/Year) 07/21/2020								(Che	elationship of Reporting Reck all applicable)  Director  Officer (give title below)  VP Fin & Chief			10% On Other (s below)	vner specify
(Street) BURLIN (City)	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person									
			I - Nor			_			·	Disp	osed of	-			1				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,			3. 4. Securities Acquired (Disposed Of (D) (Instr. 3)			, 4 and Secur Benef		ties Folicially (D)		orm: Direct D) or Indirect ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	Amount (A) or (D)		or F	rice	Transa	Transaction(s) (Instr. 3 and 4)			(111511. 4)					
Common Stock 07/21/2					′2020			P		3,000	A :		\$ <del>19</del>	3,000			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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any				Transaction of Code (Instr. Derivati		vative irities ired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nt		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
								Date Exercisa	able	Expiration Date	Title	Numl of Share							

**Explanation of Responses:** 

Remarks:

/s/ Peter Garcia, by power of <u>attorney</u>

07/21/2020

\*\* 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.