Aeglea BioTherapeutics, Inc. Form 3 July 10, 2017 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 OMB APPROVAL

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(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Wooldridge James	2. Date of Event Requiring Statement (Month/Day/Year) 07/10/2017	3. Issuer Name and Ticker or Trading Symbol Aeglea BioTherapeutics, Inc. [AGLE]			
(Last) (First) (Middle)		4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O AEGLEA BIOTHERAPEUTICS, INC., 901 S. MOPAC EXPRESSWAY, SUITE 250 (Street)		(Check all applicable) <u></u>	6. Individual or Joint/Group		
AUSTIN, TX 78746			Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned				
1.Title of Sect (Instr. 4)	ırity		2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Reminder: Rep owned directly	· •	rate line for each class of	securities beneficially	SEC 1473 (7-02	2)		

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 control number.

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

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

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Date Exercisable	Expiration Date	Title	Amount or Number of	Security	Direct (D) or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Wooldridge James C/O AEGLEA BIOTHERAPEUTICS, INC. 901 S. MOPAC EXPRESSWAY, SUITE 250 AUSTIN, TX 78746	Â	Â	Chief Medical Officer	Â
Signatures				
/s/ Charles N. York II, by power of attorney	07/10/2	017		
**Signature of Reporting Person	Date			
Explanation of Responses:				
No accurition and her officially arread				

No securities are beneficially owned

* If the form is filed by more than one reporting person, *see* Instruction 5(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. 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.