SEC Form 4
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## FORM 4

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

OMB APPROVAL

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

to Section 16. Form 4 or Form 5 obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Addr SHENK TH	1 0		2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>MeiraGTx Holdings plc</u> [ MGTX ]						5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner			
(Last) 450 E. 29TH S	(First) TREET, 14TH	(Middle)		te of Earliest Trans 0/2020	action (	Month	n/Day/Year)		Officer (give titl below)	e Othe belo	er (specify w)	
(Street) NEW YORK	NY	10016	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicate) X Form filed by One Reporting Person Form filed by More than One Reporting		
(City)	(State)	(Zip)								Person		
		Table I - Non-	-Derivative S	Securities Acc	luired	, Dis	posed of,	or Be	neficial	ly Owned		
Da		Transaction ate Aonth/Day/Year)	Execution Date,		3. Transaction Code (Instr. 8) Code V Amount (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

Ordinary Shares			07/20/2	2020		S <sup>(1)</sup>		6,667	D	\$15	157,47	76 <sup>(2)(3)</sup>			ee ootnote <sup>(4)</sup>	
	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities	6. Date Expirati (Month/	ion Dat	te ear)	7. Title a Amount Securitie Underlyi	of les sing	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia	s Ily	10. Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownershij	

Derivative Security				Acqu (A) or Dispo of (D) (Instr and 5	osed . 3, 4			Derivative Security (Instr. 3 and 4)		Owned Following Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	(Instr. 4)
		Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

## Explanation of Responses:

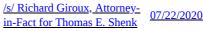
1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 27, 2019.

2. The price reported reflects the weighted average sales price. The shares were sold in multiple transactions at prices ranging from \$15.00 to \$15.025, inclusive.

3. The reporting person undertakes to provide to the SEC staff, the issuer, or a security holder of the issuer, upon request, full information regarding the number of shares sold at each separate price.

4. Represents securities held of record by Double Epiphany, LLC ("Double Epiphany"). The reporting person is a managing member of Double Epiphany and has full voting and investment power with respect to the shares held by Double Epiphany. The reporting person disclaims beneficial ownership of such shares except to the extent of any pecuniary interest therein.

**Remarks:** 



\*\* 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.

Check this box if no longer subject Instruction 1(b).