FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject 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 1934

											прапу Аст	0. 20.0									
Name and Address of Reporting Person* Perfetti Riccardo						2. Issuer Name and Ticker or Trading Symbol Applied Therapeutics Inc. [APLT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
						rippined incrapedutes inc. [Arti]										Director		10% Owner			
(1.20) (7.20) (1.11.2)						Date of Earliest Transaction (Month/Day/Year)										Officer (give title below)		Other (specify below)			
(Last) (First) (Middle) C/O APPLIED THERAPEUTICS, INC.						12/14/2021									Chief Medical Officer						
545 5TH AVENUE, SUITE 1400																					
J4J J111 AVENUE, SUITE 1400							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)															Line) V Form filed by One Reporting Person						
NEW YORK NY 10017														^	X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	state)	(Zip)												Person						
		Tab	ole I - Noi	n-Deriv	/ative	e Se	ecurities	s Acc	quired,	Dis	posed o	of, or Be	nefi	cially	/ Owned						
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,		Code (Instr. 5)			4 and Securitie Benefici Owned F		es Formally (D) (Following (I) (I		m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code V		Amount	at (A) or (D)		rice	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 12/14/						1			A		48,200) ⁽¹⁾ A		\$0.00	0.00 48,200			D			
		-	Table II -								osed of,				Owned						
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)	Date,	4. Transaction Code (Instr 8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		9	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)		Date Exercisab		Expiration Date	Title	or Nur of	ount nber ıres							
Employee Stock Option (Right to Buy)	\$9.44	12/14/2021			A		32,100		(2)	1	12/14/2031	Common Stock	32,	,100	\$0.00	32,100	0	D			

Explanation of Responses:

- 1. Consists of compensatory Restricted Stock Units granted under Applied Therapeutics, Inc.'s 2019 Equity Incentive Plan. Each compensatory Restricted Stock Unit represents a contingent right to receive one share of the issuer's common stock. One-fourth (1/4th) of the compensatory Restricted Stock Units shall vest on each of December 14, 2022, December 14, 2023, December 14, 2024 and December 14, 2025, subject to the Reporting Person continuing to provide services through each such date.
- 2. Consists of compensatory options granted under Applied Therapeutics, Inc.'s 2019 Equity Incentive Plan. One-fourth (1/4th) of the shares subject to the compensatory Option shall vest on December 14, 2022, and one thirty-sixth (1/36th) of the remaining shares subject to the compensatory Option shall vest each month thereafter, subject to the Reporting Person continuing to provide services through each such date.

Remarks:

/s/ Shoshana Shendelman as attorney-in-fact

12/16/2021

** 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.