FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person* Ortega Steven A.					2. Issuer Name and Ticker or Trading Symbol Applied Therapeutics Inc. [APLT]								heck all	l applic Directo	able) r	g Pers	son(s) to Iss 10% Ov Other (s	vner		
(Last)	(F	irst)	(Middle)		3. [Date of Earliest Transaction (Month/Day/Year)									Officer (give title below)			below)	·	
C/O APPLIED THERAPEUTICS, INC.							04/13/2022								Princ	cipal Acc	ounti	ng Office	r	
545 FIFTH AVENUE, SUITE 1400																				
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YORK NY 10017													X Form filed by One Reporting Person							
NEW TORK INT 1001/													Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)											·	1 613011					
		Tab	le I - Non	-Deriv	ative	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	neficia	lly Ov	wned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.					ay/Year) Execution		cution Date,		nsaction de (Instr. 4. Securi		ties Acquir d Of (D) (Ins	ed (A) or str. 3, 4 ar	nd Securitie Benefici		es Fo fally (D) Following (I)		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o (D)	r Price	Tr	eported ransact nstr. 3 a	on(s)			(Instr. 4)	
Common Stock 04/13/							/2022		A		3,081	(1) A :		00	15,404			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)	Execution Date, if any		4. Transaction Code (Instr. 8)				6. Date Ex Expiration (Month/Da	Date)	7. Title and Amc of Securities Underlying Derivative Secu (Instr. 3 and 4)		Deriv Secu	3. Price of Derivative Security Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactii (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares							
Employee Stock Option (Right to Buy)	\$2.02	04/13/2022			A		10,675		(2)	0	04/13/2032	Common Stock	10,67:	\$0	0.00	10,67	5	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 April 13, 2023, and one-twelfth (1/12th) of the remaining shares subject to the compensatory Restricted Stock Units shall vest each quarter thereafter, 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 April 13, 2023, 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 ** Signature of Reporting Person

04/15/2022

attorney-in-fact

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.