FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

**OMB APPROVAL** OMB Number: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Estimated average burden hours per response: 0.5

## 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 or Section 30(h) of the Investment Company Act of 1940

					_		( )		investment c								-		
1. Name and Address of Reporting Person*							2. Issuer Name <b>and</b> Ticker or Trading Symbol ALIGN TECHNOLOGY INC [ ALGN ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>HOGAN JOSEPH M</u>											,		X Director	or		10% Ov	/ner		
(Last) (First) (Middle)				3. [	Date of Earliest Transaction (Month/Day/Year)							X Officer below)	(give title		Other (s below)	pecify			
C/O ALIGN TECHNOLOGY INC.						02/20/2016							President and CEO						
2560 ORCHARD PARKWAY																			
(Street)				4. If	If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
SAN JOS	SE CA	A	95131											iled by One		•			
(City) (3		State) (Zip)											Form filed by More than One Reporting Person				ung		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Trans. Date (Month/I					ar)   i	Execution if any	recution Date,		Transaction Disposed Code (Instr. 8)			Securitie Benefici Owned F	ies Form (D) o (I) (In ed etion(s)		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code V	Amount	(A) or (D)	Price			Reporte Transac (Instr. 3		(Instr. 4)		
	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)	3A. Deemed Execution D if any (Month/Day/	ate, T	I. Γransa Code (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/\)	ate	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares							
Restricted Stock Unit	\$0.0001 <sup>(1)</sup>	02/20/2016	02/20/20	16	A		30,000		(2)	(2)	Common Stock	30,000	\$0.00	30,000		D			
Market Stock Unit	\$0.0001(1)	02/20/2016	02/20/20	16	A		69,000		(3)	(3)	Common Stock	69,000	\$0.00	69,000		D			

## **Explanation of Responses:**

- 1. Represents par value of ALGN common stock.
- 2. 1/4th of the restricted stock unit granted on February 20, 2016 will become vested on February 20, 2017 and shares will be delivered to reporting person on such vest date. 1/4th of the restricted stock unit will vest annually thereafter and shares will be delivered to reporting person on each vest date.
- 3. Represents the maximum number of shares which may be issued under the market stock unit. All of the shares which may be issued under the market stock unit will vest on the last day of the third year of the Performance Period (as defined in the market stock unit agreement).

## Remarks:

/s/ Roger E. George Atty-in-Fact for Joseph M. Hogan

02/24/2016

\*\* 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.