FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT (OF CHAN	IGES IN BEN	NEFICIAL ON	NNERSHIP

l	OMB APPRO	VAL
l	OMB Number:	3235-0287
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l	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

1. Name and Address of Reporting Person* Thaler Warren S						2. Issuer Name and Ticker or Trading Symbol ALIGN TECHNOLOGY INC [ALGN]									neck all a	pplicable) ector	ng Perso	Person(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) C/O ALIGN TECHNOLOGY INC. 2560 ORCHARD PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 10/30/2013										ficer (give title low)		below)		
(Street) 18250 SAN JOSE CA 95131 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	es Ac	quired	, Dis	sposed o	f, or	Bene	ficia	lly Ow	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,				es Acquired (A) o Of (D) (Instr. 3, 4 a			5) Sed Ber Ow	mount of urities leficially ned Following	Form:	nership Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) (D)	or P	rice	Tra	Reported Transaction(s) (Instr. 3 and 4)			(111511.4)	
Common Stock 10/30/20				2013	2013 10/30/2013		S		18,250	50 D \$5		56. 4	51,900		1	D			
Common Stock 10/30/20				2013	2013 10/30/2013		S		17,000	D \$56		56.7 1	L(2)	88,584		I	By Trust ⁽³⁾		
	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)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			ransaction of Der Sec (A) Dis of (osed) r. 3, 4	6. Date Expirati (Month/	on Da		Amou Secur Under Deriva Secur	7. Title and Amount of Securities Underlying Derivative Security (Instr.) and 4)		8. Price of Derivativ Security (Instr. 5)		Ow For Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

- 1. The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$56.27 to \$56.69, inclusive. The reporting person undertakes to provide Align Technology, Inc., any security holder of Align Technology, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 2. The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$56.66 to \$56.82, inclusive. The reporting person undertakes to provide Align Technology, Inc., any security holder of Align Technology, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. Represents shares held by the Thaler Family Trust for which the spouse of the reporting person is the trustee.

/s/ Roger E. George Atty-In-Fact for Warren Thaler

11/01/2013

** 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.