FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CI	HANGES	IN BEN	NEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden

Check this box if no longer subject to Section 16. Form 4 or Form 5

	ions may con tion 1(b).	tinue. See		File							es Exchanç			4		hours	per response:	0.5
1. Name and Address of Reporting Person* Shukla Rajiv				2. 19	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol Constellation Alpha Capital Corp. [CNACU									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner				
(Last) (First) (Middle) EMERALD VIEW, SUITE 400 2054 VISTA PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 06/23/2017									X Officer (give title Other (specification) CEO & Chairman				
(Street) WEST PALM BEACH FL 33411			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person						
(City)	((Zip)															
1. Title of S	Security (In		le I - No	n-Deriv		_	Curitie 2A. Deem		3.		4. Securiti	ies Ac	quired ((A) or		ount of	6. Ownership	7. Nature
Date (Month/Da			Day/Yea	Execution		,	Code (Instr.		Disposed Of (D) (In		(Instr.	3, 4 an	Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)		Price		ted action(s) 3 and 4)		(Instr. 4)	
Ordinary	Shares			06/23	/2017	7			P		425,000	0 ⁽¹⁾ A		\$1	10 4,018,750		D ⁽²⁾⁽³⁾	
Ordinary Shares 06/23/2				/2017	2017		J		136,250	O ⁽⁴⁾ D		\$(0 3,882,500		D ⁽²⁾⁽³⁾			
		Т									sed of, onvertib				y Owned			
1. Title of Derivative Security (Instr. 3) 2. Convers or Exerc Price of Derivatin Security				n Date, Transact Code (In:			tion of		6. Date Exercisable and Expiration Date (Month/Day/Year)		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	ode V (A) ((D)	Date Exercisa		Expiration Date	Title	or Num of					
1. Name ar <mark>Shukla</mark>		of Reporting Person	*															
	LD VIEW STA PARI	(First) 7, SUITE 400 KWAY	(Mid	dle)														
(Street) WEST P. BEACH	ALM	FL	334	11														
(City)		(State)	(Zip)			_												
	nd Address o	of Reporting Person	*															

(City) (State) **Explanation of Responses:**

(Street) WEST PALM

 ${\bf BEACH}$

(First)

FL

EMERALD VIEW, SUITE 400 2054 VISTA PARKWAY

(Middle)

33411

(Zip)

combination and one warrant to purchase one-half of one share) held by Centripetal LLC (the "Sponsor"), acquired pursuant to a second amended and restated unit subscription agreement by and between the Sponsor and the issuer.

- 2. The shares held by the Sponsor are beneficially owned by Rajiv Shukla, the issuer's Chairman and Chief Executive Officer and the managing member of the Sponsor, who has sole voting and dispositive power over the shares held by the Sponsor.
- 3. Mr. Shukla disclaims beneficial ownership over any securities owned by the Sponsor in which he does not have any pecuniary interest.
- 4. As contemplated in connection with the initial public offering of the issuer, 136,250 ordinary shares of the issuer were forfeited by the Sponsor and returned to the issuer for no consideration as a result of the issuence of 136,250 ordinary shares by the issuer to Cowen Investments, LLC upon consummation of the sale of private units in connection with the issuer's initial public offering.

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.