FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vasiliigtoii,	D.C.	20343

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0.5								

	tion 1(b).	nuc. Sec		Filed							es Exchang npany Act o		1934			nours	s per re	esponse:	0.5
Name and Address of Reporting Person* Brainard Diana					2. Issuer Name and Ticker or Trading Symbol Allovir, Inc. [ALVR]										tionship all app Direc	,		rson(s) to Issuer 10% Owner	
l	C/O ALLOVIR, INC.						3. Date of Earliest Transaction (Month/Day/Year) 08/03/2020								Office below	cer (give title ow)		Other (specify below)	
139 MAIN STREET, SUITE 500					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
,	LIDGE M		2142											X		filed by Mo		porting Pers an One Rep	
(City)	(S1		Zip)																
Date				2. Transac	tion 2A. Deemed Execution Date,		3. Transa Code (8)	ction Instr.	4. Securitie	s Acquired (A) or of (D) (Instr. 3, 4 and (D) Price		or and	5. Amount of		Fori (D)	ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock 08/0				08/03/	2020		P		6,300	A	\$	\$17		,300		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)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transa Code (8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares		nt er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

Remarks:

/s/ Brett Hagen, as Attorney-

08/05/2020

in-Fact

** 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.