FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
l	OMB Number:	3235-0287									
	Estimated average burden										
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* SCHULMAN AMY W							2. Issuer Name and Ticker or Trading Symbol <u>Cyclerion Therapeutics</u> , <u>Inc.</u> [CYCN]									nip of Reportir oplicable) ector	ng Per	rson(s) to Is			
	CLERION	THERAPEUTIC	Middle) S, INC.			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2019 Officer below)											(give title Other (specify below)				
301 BINNEY STREET							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CAMBRIDGE MA 02142															X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	itate) (Zip)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5)						nd Secu Bene	ficially ed Following	Forn (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount		A) or D)	Price	Trans	action(s) 3 and 4)			(Instr. 4)				
Common Stock 04/01/2						2019					4,229	(1)	Α	\$ <mark>0</mark> .	00	4,229		D			
Common Stock 04/01/						/2019					3,279	(2)	Α	\$ <mark>0</mark> .	00	7,508		D			
		Та									osed of, onvertib				y Owne	i					
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,		Transaction Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	, [C	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 Sha	ber							

Explanation of Responses:

- 1. In connection with the separation (the "Separation") of Cyclerion Therapeutics, Inc. ("Cyclerion") from Ironwood Pharmaceuticals, Inc. ("Ironwood"), the reporting person received Cyclerion shares representing an equitable adjustment of Ironwood shares held by the reporting person prior to the Separation.
- 2. Represents shares of Cyclerion common stock granted to the reporting person as a result of adjustments to existing Ironwood shares of common stock made in connection with the Separation.

Remarks:

/s/ Larry Miller, Attorney-in-Fact

04/03/2019

** 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.