| SEC For  | m 4   |  |  |   |                  |  |  |        |                |  |        |                    |                |                |   |  |                      |  |   |            |
|--|---|--|--|---|------------------|--|--|--------|----------------|--|--------|--------------------|----------------|----------------|---|--|----------------------|--|---|------------|
| FORM 4 UNITE   |   |  |  | NITED STATES SECURITIES AND EXCHANGE COMN<br>Washington, D.C. 20549 |                  |  |  |        |                |  |        |                    |                |                |   |  | SSION OMB APPROVAL   |  |   |            |
| Check this box if no longer subject to<br>Section 16. Form 4 or Form 5<br>obligations may continue. See<br>Instruction 1(b).                         |   |  |  |   | ed purs          | rsuant   | t to Section   | n 16(a | a) o           | of the Secu                            | uritie |                    | HIP            | Estim          | Numbe<br>ated av                                    | erage burder   | 3235-0287<br>0.5     |  |   |            |
| 1. Name and Address of Reporting Person <sup>*</sup><br>Zung Jonathan B.   |   |  |  |   | 2. 1             | or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name <b>and</b> Ticker or Trading Symbol Evelo Biosciences, Inc. [EVLO] |  |        |                |  |        |                    |                |                |   | elationship o<br>ck all applic<br>Director   | able)                | ıg Pers  | 10% Ov  | /ner       |
| (Last) (First) (Middle)<br>C/O EVELO BIOSCIENCES, INC.   |   |  |  |   |                  | 3. Date of Earliest Transaction (Month/Day/Year)   |  |        |                |  |        |                    |                |                |   |  |                      |  |   |            |
| 620 MEMORIAL DRIVE<br>(Street)<br>CAMBRIDGE MA 02139   |   |  |  |   | 4. li            | Line)<br>X Form fi   |  |        |                |  |        |                    |                |                |   | oint/Group Filing (Check Applicable<br>led by One Reporting Person<br>led by More than One Reporting |                      |  |   |            |
| (City) (State) (Zip)   |   |  |  |   |                  |  |  |        |                |  |        |                    |                |                |   | Person   |                      |  |   |            |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |   |  |  |   |                  |  |  |        |                |  |        |                    |                |                |   |  |                      |  |   |            |
| Date   |   |  |  | 2. Trans<br>Date<br>(Month/I  |                  | ear)   | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year   |        | <sup>,</sup> , | Code (Instr.                           |        |                    |                |                | Beneficia<br>Owned Fo                               | es Foi<br>ially (D)<br>Following (I)   |                      | : Direct<br>Indirect<br>str. 4)  | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership |            |
|  |   |  |  |   |                  |  |  |        | Ī              | Code V                                 | '      | Amount             | (A)<br>(D)     |                | Price   | rice Reported<br>Transaction<br>(Instr. 3 and  |                      |  |   | (Instr. 4) |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities) |   |  |  |   |                  |  |  |        |                |  |        |                    |                |                |   |  |                      |  |   |            |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Da<br>if any<br>(Month/Day/Y | ) C   | ansac<br>ode (In |  | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed<br>of (D) (Instr.<br>3, 4 and 5) |        | Ex             | Date Exer<br>xpiration D<br>lonth/Day/ | ate    | of Securities      |                | ecurity        | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Numbe<br>derivativ<br>Securitie<br>Beneficia<br>Owned<br>Followin<br>Reported<br>Transact         | e<br>es<br>ally<br>g | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)               |            |
|  |   |  |  | C   | ode ,            | v  | (A)  | (D)    |                | ate<br>xercisable                      |        | Expiration<br>Date | Title          | 0<br>N         | Amount<br>or<br>lumber<br>of Shares                 |  | (Instr. 4)           | .01(3)   |   |            |
| Stock<br>Option<br>(Right to<br>Buy)   | \$2.24  | 07/19/2022                                 |  |   | A                |  | 115,000  |        |                | (1)                                    | 07     | 7/19/2032          | Commo<br>Stock | <sup>n</sup> 1 | 15,000  | \$0  | 115,0                | 00   | D   |            |

Explanation of Responses:

1. The option will yes as to 50% of the underlying shares on the first anniversary of the date of grant, and as to the remaining 50% of the underlying shares on the second anniversary of the date of grant.

**Remarks:** 

/s/ Daniel S. Char, Attorney-in-10/14/2022 Fact for Jonathan B. Zung

\*\* 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.