| SEC | Form | 4 |
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| FORM 4 | 4 |
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

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

| 1. Name and Address of Reporting Person [*] <u>Nuyten Dimitry SA</u> | 2. Issuer Name and Ticker or Trading Symbol ADURO BIOTECH, INC. [ADRO] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner |
|--|---|--|
| (Last) (First) (Middle) C/O ADURO BIOTECH, INC. 740 HEINZ AVENUE | 3. Date of Earliest Transaction (Month/Day/Year) 02/21/2020 | X Officer (give title Other (specify below) below) Chief Medical Officer |
| (Street) BERKELEY CA 94710 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting |
| (City) (State) (Zip) | vative Securities Acquired Disposed of or Benefi | Person cially Owned |

Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| L | Table 1 - Non-Derivative Securities Acquired, Disposed 01, 01 Beneficiary Owned | | | | | | | | | | | |
|---|---|--|---|------------------------------|---|--|---------------|-------|---|---|---|--|
| | 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| (eigi, puis, cuis, varians, options, convertisie securities) | | | | | | | | | | | inticoj | | | | |
|--|---|--|---|------------------------------|---|------------|-----|--|--------------------|---|-------------------------------------|---|--|--|--|
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | Derivative | | 6. Date Exerc Expiration Da (Month/Day/N | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | | |
| Stock Option (Right to Buy) | \$3.65 | 02/21/2020 | | A | | 250,000 | | (1) | 02/20/2030 | Common Stock | 250,000 | \$0.00 | 250,000 | D | |

Explanation of Responses:

1. The shares subject to the Option vest in 48 equal monthly installments from the vesting commencement date of February 21, 2020.

/s/ Celeste Ferber, Attorney-in-02/24/2020 Fact for Dimitry S.A. Nuyten

** 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.