FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|-------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average | burden | | | | | | | | | |

0.5

hours per response:

| | Check this box if no longer subject to |
|---|--|
| ١ | Section 16. Form 4 or Form 5 |
|) | obligations may continue. See |
| | Instruction 1(h) |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | | | or S | Sectio | n 30(h) | of the I | Investme | ent Co | mpany Act | of 19 | 940 | | | | | | | |
|--|---|--|--|---------|---|---|---|--|--------------------------------|---|----------------------|--|----------------|-----------------------|--|---|--|-------------|---|--|
| 1. Name and Address of Reporting Person* SCHAFER GREGORY W | | | | | 2. Issuer Name and Ticker or Trading Symbol ADURO BIOTECH, INC. [ADRO] | | | | | | | | | | ll app | | ıg Per | 10% O | wner | |
| (Last) (First) (Middle) C/O ADURO BIOTECH, INC. 626 BANCROFT WAY, 3C | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/16/2016 | | | | | | | | | | | Officer (give title below) Chief Operating Officer | | | | |
| (Street) BERKELEY CA 94710 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | ine) | dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - Noi | n-Deriv | ative | Sec | curitie | s Ac | quired | , Dis | posed o | f, o | r Ben | efici | ally O | wne | ed | | | |
| Date | | | | Date | e Ex hth/Day/Year) if | | | 2A. Deemed Execution Date, f any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securit Disposed 5) | | | | | 4 and Sec Ber Ow | | curities eneficially | | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | . т | Transaction(s) (Instr. 3 and 4) | | | | (111311. 4) |
| Common | Stock | | | 05/16 | /2016 | s ⁽¹⁾ 905 D \$8.2 ⁽²⁾ 49,279 ⁽³⁾ D | | | | | | | | | | | | | | |
| | | Та | | | | | | | | | osed of, onvertib | | | | y Owi | ned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | 4. Transa Code (I | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Expirati (Month/ | on Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Instr and 4) | | | 8. Pric Deriva Securi (Instr. | ivative urity | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | F C C | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | or Nu of | nount mber ares | | | | | | |

Explanation of Responses:

1. The sales reported in this Form 4 were affected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on September 13, 2015.

Code V

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$8.155 to \$8.24, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.

(A) (D)

3. Includes 905 shares acquired by the Reporting Person under the Issuer's 2015 Employee Stock Purchase Plan on May 13, 2016.

Remarks:

/s/ Jennifer Lew, Attorney-in-05/18/2016 **Fact**

** Signature of Reporting Person

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.