FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Lew Jennifer						2. Issuer Name and Ticker or Trading Symbol ADURO BIOTECH, INC. [ADRO]									tionship of Reporting Pers all applicable) Director Officer (give title			son(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) C/O ADURO BIOTECH, INC. 740 HEINZ AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 07/03/2017									below) below) Sr. Vice President of Finance				
(Street) BERKELEY CA 94710					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indiv ne) X	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)												1 013011	•			
		Tak	le I - N	on-Deri	ivativ	e Sec	curit	ies Ac	quire	d, Di	sposed o	f, or Be	neficia	lly (Owned				
1. Title of Security (Instr. 3)				2. Transa Date (Month/D		Exe) if ar	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			nd 5) Securit Benefic Owned		es ally Following	Form (D) o	r Indirect	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	tion(s)			(Instr. 4)
Common Stock 07/03/2					/2017	17			M		12,000	A	\$0.82	2	54,595			D	
Common Stock 07/03/20					/2017	17		S ⁽¹⁾		12,000	D	\$11.13	11.136 ⁽²⁾		42,595		D		
		-	Table II								posed of, convertil			y O	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I		4. Transa Code (8)				6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		Derivativ Security		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to	\$0.82	07/03/2017			M			12,000	(3))	11/26/2023	Common Stock	12,000		\$0.00	83,709	9	D	

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 May 26, 2017.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$10.85 to \$11.40, 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.
- 3. Twenty-five percent of the shares subject to the Option vested on the first anniversary of the vesting commencement date of October 25, 2014, and the remainder vests in 36 equal monthly installments thereafter for the following three years

Remarks:

07/06/2017

** 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.