FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ı	OIVID APPROVAL							
	OMB Number:	3235-0287						
l	Estimated average burde	n						
ı	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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Smith Bryan E.						2. Issuer Name and Ticker or Trading Symbol Eledon Pharmaceuticals, Inc. [ELDN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title below)					
(Last)	Last) (First) (Middle) C/O ELEDON PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 06/13/2024							give title al Counse	el, Corp	Other (sp below) porate Sec	, l		
19800 MACARTHUR BLVD STE. 250						4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person						
(Street) IRVINE CA		A	92612								N N	_	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to sat the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									satisfy				
		Та	ble I - Non	-Deriva	tive S	ecuritie	s Ac	quired, D	isposed o	of, or Be	neficially	Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Disposed Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amoun Securities Beneficia Owned Fo	s Ily	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code V	Amount	(A) o (D)	r Price	Transacti (Instr. 3 a				msu. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
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)	Cod	saction e (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		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)		
				Cod	e V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)					
Stock Option (right to buy)	\$2.3	06/13/2024		A		241,650		(1)	05/01/2033	Common Stock	241,650	\$0	241,65	0	D			

Explanation of Responses:

1. This transaction represents the attainment of the performance conditions applicable to an option award subject to both performance-based and time-based vesting criteria granted to the reporting person on May 1, 2023. The option was determined to satisfy the performance-based vesting criteria with respect to 241,650 shares of underlying Common Stock on June 13, 2024 and time-based vesting criteria with respect to 60,413 shares of underlying Common Stock on May 1, 2024. The option will satisfy the time-based vesting criteria with respect to the 181,237 remaining shares of Common Stock underlying the option in substantially equal quarterly installments over a three-year period ending May 1, 2027.

> /s/ Paul Little, as attorney-infact for Bryan Smith

06/14/2024

** 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.