

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

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

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

1. Name and Address of Reporting Person* <u>Cataldi Fabio</u> (Last) (First) (Middle) <u>C/O LANDOS BIOPHARMA, INC.</u> <u>PO BOX 11239</u> (Street) <u>BLACKSBURG VA 24062</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Landos Biopharma, Inc. [LABP]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Chief Medical Officer</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>02/28/2023</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	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 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

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)	4. Transaction Code (Instr. 8)		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) (Instr. 4)	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				
Employee Stock Option (right to buy)	\$0.37	02/28/2023		A		184,500		(1)	02/27/2033	Common Stock	184,500	\$0.00	184,500	D	
Restricted Stock Unit	(2)	02/28/2023		A		276,750		(3)	02/27/2033	Common Stock	276,750	\$0.00	276,750	D	

Explanation of Responses:

- 1/4th of the shares initially subject to the option shall vest on the one (1) year anniversary of the date of grant (such anniversary being the "Anniversary Date") and 1/48th of the shares initially subject to the option shall vest on each monthly anniversary of the Anniversary Date thereafter, subject to the Reporting Person's continuous service with the Issuer on each such date.
- Each restricted stock unit represents the right to receive one share of Landos Biopharma, Inc., Inc. common stock.
- The Restricted Stock Unit ("RSU") shall vest as to 66 2/3% of the shares underlying the RSU on the second anniversary of the date of grant and shall vest as to 33 1/3% of the shares underlying the RSU on the third anniversary of the date of grant, subject to the Reporting Person's continuous service with the Issuer on each such date.

Remarks:

/S/ Gregory Oakes, Attorney-in-Fact 03/02/2023

** 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.