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 |     |  |  |  |  |  |  |  |  |
| 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).

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*  Yeramian Patrick D                 |  |  |  |            | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Amylyx Pharmaceuticals, Inc. [ AMLX ] |  |            |                            |                                       |  |  |       |                 | elationship of<br>ck all applica<br>Director  | able)   | g Pers                  | on(s) to Issu<br>10% Ov<br>Other (s                                      | wner  |       |
|--|--|--|--|------------|--|--|------------|----------------------------|---------------------------------------|--|--|-------|-----------------|---|---|-------------------------|--|---|-------|
| (Last) (First) (Middle) C/O AMYLYX PHARMACEUTICALS, INC. 43 THORNDIKE STREET |  |  |  |            | 3. Date of Earliest Transaction (Month/Day/Year) 01/06/2022                              |  |            |                            |                                       |  |  |       |                 |   | X Officer (give title Other (s below) below)  Chief Medical Officer |                         |  |   |       |
| (Street) CAMBR (City)  |  | IA<br>State)                               | 02142<br>(Zip)   |            | 4. If  | 4. If Amendment, Date of Original Filed (Month/Day/Year)   |            |                            |                                       |  |  |       | 6. Ind<br>Line) | lividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |   |                         |  |   |       |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |  |  |            |  |  |            |                            |                                       |  |  |       |                 |   |   |                         |  |   |       |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D                     |  |  |  | /Day/Year) |  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year |            | Transaction I Code (Instr. |                                       | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4 |  |       |                 | 5. Amoun<br>Securities<br>Beneficia<br>Owned Fo   | s<br>lly<br>ollowing  | Form<br>(D) or          | : Direct<br>r Indirect<br>str. 4)  | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |       |
|  |  |  |  |            |  |  |            |                            | Code                                  | v  | Amount   |       | (A) or<br>(D)   | Price   | Transacti<br>(Instr. 3 a  | ion(s)                  |  |   | (5 4) |
| Common Stock 01/   |  |  |  | 01/06      | 6/2022   |  | A          |                            | 28,333 <sup>(1)</sup> A               |  | \$0.00   | 206   | 206,333         |   | D   |                         |  |   |       |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |  |            |  |  |            |                            |                                       |  |  |       |                 |   |   |                         |  |   |       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                          | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Dat<br>if any<br>(Month/Day/Ye | Co         | ansact<br>ode (In  |  | Derivative |                            | 6. Date Ex<br>Expiration<br>(Month/Da |  | 7. Title and Amo<br>of Securities<br>Underlying<br>Derivative Secu<br>(Instr. 3 and 4) |       |                 | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)   | 9. Number derivative Securities Beneficia Owned Following Reported  | e<br>s<br>lly           | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>ct (Instr. 4)                          |       |
|  |  |  |  | Co         | ode \  | v  | (A)        |                            | Date<br>Exercisab                     |  | xpiration<br>ate   | Title | 0               | mount<br>r<br>lumber<br>of Shares   |   | Transacti<br>(Instr. 4) | on(s)  |   |       |
| Stock<br>Option<br>(right to<br>buy)   | \$19   | 01/06/2022                                 |  |            | A  |  | 127,500    |                            | (2)                                   | O  | 1/06/2032  | Comi  |                 | 27,500  | \$0.00  | 127,500                 |  | D   |       |

## **Explanation of Responses:**

- 1. The reported transaction involves the Reporting Person's receipt of a restricted stock unit award (a "RSU"). The RSU shall vest in 4 equal annual installments, with the first installment vesting on the first anniversary of the date of the grant, subject to the Reporting Person's continued service to the Issuer through such vesting date
- 2. 1/4 of the shares subject to the option shall vest and become exercisable on the one year anniversary of the date of grant, and the remaining shares shall vest monthly over the remaining 36 months, subject to the Reporting Person's continuous service to the Issuer through such vesting date.

## Remarks:

/s/ Joshua B. Cohen, as 01/10/2022 Attorney in Fact for Patrick D.

\*\* Signature of Reporting Person Date

Yeramian

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.