SEC For	m 4 FORM	4	UNITED) STA	TE	s si			ES AND		IAI	NGE C	OMM	SSION				
							V	ngton, D.C. 2	20549				OMB APPROVAL		/AL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).						suant	to Section	n 16(a	a) of the Sec	urities Exc				OMB Number: 3235-028 Estimated average burden hours per response: 0.				
1. Name and Address of Reporting Person [*] Zibelman Audrey Ann									ker or Tradir erprises,		(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) C/O EOS ENERGY ENTERPRISES, INC.					3. Date of Earliest Transaction (Month/Day/Year) 12/08/2020									Officer (give title Other (specify below) below)				
3920 PARK AVENUE					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) EDISON NJ 08820					_									X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)															
		Tab	le I - Nor	ו-Deri	vativ	e Se	curities	s Ac	quired, D	ispose	d of	f, or Be	neficial	ly Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Dat			Code (In	ion Dispo				Benefici	s Form ally (D) c following (I) (II		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	/ Amo	Amount (A) (D)		Price	Transact (Instr. 3	ion(s)			
		-	Fable II -	Deriva (e.g., p	ative outs,	Sec call	urities s, warr	Acq ants	uired, Dis s, options	sposed , conve	of, rtib	or Ben ole secu	eficially irities)	Owned				
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. Transactio Code (Instr 8)				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	Expirati Date	on	Title	Amount or Number of Shares					
Restricted Stock Units	(1)	12/08/2020			Α		5,198		(2)	(3)		Common Stock	5,198	\$0	5,198	8	D	
Stock Option (Right to Buy)	\$14.43	12/08/2020			Α		18,473		(4)	12/08/20	25	Common Stock	18,473	\$0	18,47	3	D	

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock

2. The reporting person received restricted stock units which vest on the earlier of (i) the first anniversary of the Grant Date, and (ii) immediately prior to the date of the next annual shareholders meeting of the Company following the Grant Date; provided, that, the Restricted Stock Units shall vest in full upon the consummation of a Change in Control.

3. Not applicable.

4. The reporting person was granted an option to purchase Common Stock which vests on the earlier of (i) the first anniversary of the Grant Date, and (ii) immediately prior to the date of the next annual shareholders meeting of the Company following the Grant Date; provided, that, the option shall vest in full upon the consummation of a Change in Control.

/s/ Sagar Kurada as attorney-infact for Audrey Zibelman <u>12/10/2020</u>

** 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.