FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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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* Epstein David R					2. Issuer Name and Ticker or Trading Symbol Axcella Health Inc. [AXLA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Epsten</u>	Daviu r	<u> </u>									-			X	Direc	tor		10% O	wner	
(Last)	`	irst) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/18/2020										Office below	er (give title w)		Other (below)	specify	
840 MEMORIAL DRIVE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)					1									X	Form	filed by On	e Rep	orting Pers	son	
CAMBR 	IDGE M	A 0	2139												n filed by More than One Reporting on					
(City)	(S	tate) (Z	Zip)																	
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3enef	icially	y Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Exec if an	A. Deemed xecution Date, any Month/Day/Year)				4. Securitie Disposed (5)			4 and Secur Benef		cially Following	Form (D) o	vnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	(A) or (D)		rice	Transaction(s) (Instr. 3 and 4)				(11301. 4)	
Common Stock 05/18/2				2020				P		50,000	I	1 \$	34.75	118,103		D				
	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)	if any	emed ion Date, //Day/Year)	Code (Instr.		of Deriv Secu Acqu (A) o Dispo	r osed) r. 3, 4	6. Date Exerc Expiration Di (Month/Day/N		ite	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 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 Benefical Ownership (Instr. 4)	

Explanation of Responses:

By: /s/ Heidy King-Jones, as Attorney-in-Fact

05/20/2020

** 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.