FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	D C	20540
Washington,	D.C.	20049

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

Name and Address of Reporting Person* Kroeker Nathan				2. Issuer Name and Ticker or Trading Symbol Eos Energy Enterprises, Inc. [EOSE]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (speci						
(Last)	,	irst) ENTERPRISES	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/25/2024							below)			below)	pecity	
3920 PARK AVENUE					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person					
(Street) EDISON	ı N	J	08820											Form filed by More than One Report Person				
(City)	(S	tate)	(Zip)		R	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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
		Та	ble I - Nor	n-Deri	ivativ	/e Se	curities	s Ac	quired, [Disp	osed c	of, or Be	neficially	/ Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,		e, Transaction Dispose Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amoun Securities Beneficia Owned Fo	Form (D) or ollowing (I) (In		Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) (D)	Price	Transaction(s) (Instr. 3 and 4)				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	ate,	Code (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)	s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)	on(o)		
Restricted Stock Units	(1)	07/25/2024			A		662,500		(2)		(3)	Common Stock	662,500	\$0	662,50	00	D	

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of common stock.
- 2. The reporting person received a grant of RSUs under the Issuer's 2020 Incentive Plan, which will vest in three equal installments on each of the first three anniversaries of the grant date, subject to continued service through each vesting date.
- 3. Not applicable.

Remarks:

/s/ Michael Silberman as attorney-in-fact for Nathan

07/29/2024

Kroeker

** 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.