FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	nd Address of ds Williar	Reporting Person	*						ker or Tr ng Co		Symbol E]			(Check	all app Direc	tor	1	0% Ο\	wner
	(Fir ANDME HO STER POIN	DLDING CO.	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/20/2024								Officer (give title Other (specify below) Head of Therapeutics Discovery							
(Street) SOUTH FRANCI	ISCO CA		94080 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line)	Form Form	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
	`			n-Deriva	tive \$	Secu	rities	Acq	uired	, Dis	posed of	, or E	Benefic	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)				4 and Securit Benefit Owned		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o (D)	Price	9		ed ction(s) 3 and 4)			(Instr. 4)
Class A Common Stock 08/20/2				024				F		57,365	D	\$0.3	3555	57	3,069	D			
		Та	ble II -								osed of, convertib				Owne	d			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execut if any	Deemed ution Date, / Transact Code (In 8)					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Form Direct or In (I) (Ir		Beneficia Ownersh (Instr. 4)
							(A) (D)		Date Expi Exercisable Date		Expiration		Amount or Number of	`					

Explanation of Responses:

Remarks:

/s/ William G. Richards

** Signature of Reporting Person Date

08/21/2024

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.