SEC For	m 4																
	FORM	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549												OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).									ES IN BE	SHIP	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5						
1. Name and Address of Reporting Person <sup>*</sup> <u>Dybbs Michael</u>					2.1	ssuer	( )	d Tic	investment C ker or Trading (TX ]		(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O SAMSARA BIOCAPITAL, L.P.						Date o <mark>/09/2</mark>		Tran	saction (Mont	h/Day/Year)		Officer (give title Other (specify below) below)					
628 MID (Street) PALO A	DLEFIELI	94301		4.1	If Ame	ndment, I	Date	of Original Filed (Month/Day/Year)			Lin	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)		ative Securities Acquired, Disposed of, or Beneficia													
Iable I - Non-Deriva   1. Title of Security (Instr. 3)   2. Transa Date (Month/D					action	n 2 I ear) i	2A. Deemed Execution Date if any (Month/Day/Yea		a, 3. 4. Secur Transaction Dispose Code (Instr. 5)		of, or Benefic rities Acquired (A) o ed Of (D) (Instr. 3, 4		5. Amour Securitie Beneficia Owned F	nt of es ally Following	Form	Direct C Indirect E str. 4) C	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code V	Amount	(A) o (D)	r Price	Price Reported Transaction (Instr. 3 and				
		-							uired, Dis s, options,				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 D if any (Month/Day/	ate, T	k. Fransaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/	ate	of Securities		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	ve ( es F ally [ ng ( d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$18	07/09/2020			A		10,700		(1)	07/08/2030	Common Stock	10,700	\$0.00	10,700	0	D	

## Explanation of Responses:

1. All shares subject to the option vest 100% on the first anniversary of July 9, 2020, or, if earlier, on the day immediately preceding the first annual meeting of the Issuer's stockholders in 2021 at which one or more members of the Issuer's board of directors are to be elected. Each grant, to the extent outstanding and otherwise unvested, will become fully vest should a "change in control" of the Issuer occur (as described in the applicable award agreement) or upon the Reporting Person's separation from service with the Issuer due to the Reporting Person's death or "disability" (as described in the applicable award agreement) or upon the Reporting Person's separation from service with the Issuer due to the Reporting Person's death or "disability" (as described in the applicable award agreement) or upon the Reporting Person's separation from service with the Issuer due to the Reporting Person's death or "disability" (as described in the applicable award agreement) or upon the Reporting Person's separation from service with the Issuer due to the Reporting Person's death or "disability" (as described in the applicable award agreement) or upon the Reporting Person's death or "disability" (as described in the applicable award described award described award described in the applicable award described aw agreement).

## **Remarks:**

/s/ Matthew Plunkett, Attorney-07/10/2020

in-Fact for Michael Dybbs

\*\* 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.