SEC For	m 4																	
FORM 4			UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP													OMB APPROVAL		
																OMB Number: 3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See																ated ave per resp	rage burden ionse:	0.5
	ion 1(b).			File				(a) of the Sec e Investment							liouio			
1. Name and Address of Reporting $\operatorname{Person}^{\star}$								ker or Trading DINGS, I		onship of Reporting Person(s) to Issuer all applicable)								
<u>PureTech Health plc</u>				ļ					Director X 10% Owner				vner					
(Last) (First) 6 TIDE STREET, SUITE 400		(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/12/2023 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. India										Officer (give title Other (specify below) below)				
														ividual or Joint/Group Filing (Check Applicable Line)				
(Street)				—									x		•	•	ing Person Dne Reporti	ng Dorcon
(Street) BOSTON MA			02210	ŀ	<u> </u>		4 (-)	-	Formined				ng Person					
-				—	Rui	e 1005-	1(C)	Transac	CTIO	n Ind	licatio	า						
(City)	(5	State)	(Zip)					icate that a tran onditions of Ru					contract, ins	struction or wri	tten plan t	that is in	tended to sa	tisfy the
			Table I - Non	-Deriva	ative	Securiti	es A	cauired. E	Disp	osed	of. or E	Benef	icially O	wned				
1. Title of Security (Instr. 3)				2. Transa		2A. Dee	2A. Deemed Execution Date,		3. 4. Sec			quired ((A) or	5. Amount of			nership Direct	7. Nature of Indirect
				Date (Month/D	ay/Yea			Code (In		Dispo	osed Of (D) (Instr. 3, 4 and		3, 4 and 5)	Beneficially Following			Indirect	Beneficial Ownership
									v	Amou		(A) or (D)	Price	Reported				(Instr. 4)
			Table II - F	erivat	ive S	Securities	Curities Acc		d Disno			Beneficially O		1.	,			
								s, options										
1. Title of Derivative	2. Conversion	3. Transaction Date	3A. Deemed Execution Date,	4. Transa		Derivative	Derivative E		6. Date Exercisable and Expiration Date		7. Title a Securiti	es Unde	erlying	Derivative	derivati		10. Ownership	
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	Code 8)	(Instr.	nstr. Securities (Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(Month/Day/Year)			Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securiti Benefic Owned		Form: Direct (D) or Indirec		
															Following Reported Transaction	d	(I) (Instr. 4	
								Date		oiration	1 1	Num	ount or of		(Instr. 4)			
				Code		(A)	(D)	Exercisable	Date	e	Title	Sha	res					By
Convertible Note	\$0.0134	06/12/2023		Р		\$3,000,000		06/12/2023	07/3	31/2023	Common Stock	¹ 223	,880,597	\$3,000,000	\$3,000	D,000	Т	PureTech Health
																		LLC
	d Address of Ch Health	Reporting Person																
		- <u>PC</u>				-												
(Last)	TREET OF	(First)	(Middle)															
6 TIDE S	TREET, SU	JITE 400																
(Street)																		
BOSTON	1	MA	02210															
		(State)	(Zip)															
(City)		()	(24)			_												
	d Address of	Reporting Person*	(219)															
1. Name an	d Address of ch Health	Reporting Person*	(210)															
1. Name an PureTee		Reporting Person [*]				_												
1. Name an <u>PureTec</u> (Last)		Reporting Person* LLC (First)	(Middle)			_												
1. Name an PureTec (Last) 6 TIDE S	<u>ch Health</u>	Reporting Person* LLC (First)				_												
1. Name an <u>PureTec</u> (Last)	<u>ch Health</u> TREET, SU	Reporting Person* LLC (First)				_												
1. Name an PureTec (Last) 6 TIDE S (Street)	<u>ch Health</u> TREET, SU	Reporting Person* LLC (First) JITE 400	(Middle)			-												

PURETECH HEALTH PLC, By:	
/s/ Bharatt Chowrira, Name:	
Bharatt Chowrira, Title:	06/14/2023
President, Chief Business,	
Financial and Operating Officer	
PURETECH HEALTH LLC, By:	
/s/ Bharatt Chowrira, Name:	
Bharatt Chowrira, Title:	06/14/2023
President, Chief Business,	
Financial and Operating Officer	
** Signature of Reporting Person	Date

* 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.