FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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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 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 intended to satisfy the affirmative

Filed p

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02
	Estimated average burd	den
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	
or Section 30(h) of the Investment Company Act of 1940		

	e conditions of struction 10.	Rule 10b5-1(c).																	
Name and Address of Reporting Person* Fox Jennifer A.					2. Issuer Name and Ticker or Trading Symbol PROKIDNEY CORP. [PROK]								heck all a		able)	Pers	on(s) to Issi 10% Ow		
(Last) (First) (Middle) C/O PROKIDNEY CORP					3. Date of Earliest Transaction (Month/Day/Year) 09/03/2024									ficer low)	(give title		Other (s below)	pecify	
2000 FR	ONTIS PLA	AZA BLVD, SU	ITE 250	1	4 If Amandanant Data of Original Filed (Manth/Data)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) WINSTON SALEM NC 27103			27103	*-	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					.	
(City)	(St	tate)																	
		Tab	le I - Non-D	erivativ	e Sec	curitie	s Ac	quired,	Dis	posed c	of, or Be	neficia	illy Ow	ned	l				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Da			ction Instr.				4 and Sec		rities Fo ficially (D) ed Following (I)		: Direct C Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) o	r Price	Trai	sacti	tion(s) and 4)			msu. 4)			
		Т					uired, D s, option					y Own	ed						
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/Ye	Code	action (Instr.	of		6. Date Exercisabl Expiration Date (Month/Day/Year)		Amount of		of s g Security	8. Price Derivat Securit (Instr. 9	ive y	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount or Number of Shares	1						
Director stock option (right to	\$2.4	09/03/2024		A		9,535		(1)	0	9/03/2034	Class A Ordinary Shares	9,535	\$0		9,535		D		

Explanation of Responses:

1. The option shall vest and become exercisable on July 11, 2025 subject to Ms. Fox's continued service with the Company through the applicable vesting date.

/s/ Todd Girolamo, attorney in 09/04/2024 <u>fact</u>

** 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.