Instruction 1(b)

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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL
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OMB Number:	3235-0287						
Estimated average burden							
hours per response.	0.5						

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

1. Name and Address of Reporting Person [*] Sinha Uma				er Name and Ticker KIDNEY CO			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(First)	(Middle)	3. Date 05/30/	of Earliest Transac 2024	tion (Month/D	ay/Year)		Officer (give title below)		(specify		
C/O PROKIDNEY CORP 2000 FRONTIS PLAZA BLVD, SUITE 250 (Street)			4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Line) X Form filed by One Reporting Per Form filed by More than One Re Person						on		
WINSTON SALEM	NC	27103	Rule	Rule 10b5-1(c) Transaction Indication								
(City)	(State)	(Zip)	Ch the	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.								
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
4 Title of Security (Instr. 2)			Transaction	24 Deemed	•	4 Securities Acquired (A)		E Amount of	6 Ownership	7 Noture of		

1. Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date,	Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 5. Number of 6. Date Exercisable and 7. Title and 1. Title of 3. Transaction 3A. Deemed 8. Price of 9. Number of 10. 11. Nature 2. Conversion Amount of Securities Underlying Derivative Securities Expiration Date (Month/Day/Year) Derivative Date Execution Date Transaction Derivative derivative Ownership of Indirect Security (Instr. 3) or Exercise Price of if any (Month/Day/Year) Code (Instr. 8) Security (Instr. 5) Form: Direct (D) Beneficial Ownership (Month/Day/Year) Securities Beneficially Acquired (A) Owned Following Reported Transaction(s) or Disposed of (D) (Instr. 3, 4 and 5) Derivative Security (Instr. 3 and 4) or Indirect (I) (Instr. 4) Derivative (Instr. 4) Security Amount (Instr. 4) or Number Date Exercisable Expiration Date of Shares Code v (A) (D) Title Director Class A stock 62,558⁽¹⁾ 62,558 05/30/2024 (2) \$4 2 05/30/2034 62 558 D option Α Ordinary \$<mark>0</mark> (right to Shares buy)

Explanation of Responses:

1. These options were granted under the Issuer's non-employee director compensation policy.

2. The options will vest in full on the sooner of the one-year anniversary of the date of grant or the date of Company's next annual general shareholder meeting

/s/ Todd Girolamo, attorney in fact 06/03/2024

** 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.