FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
-------------	------	-------	--

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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* <u>Legorreta Pablo G.</u>				PR	2. Issuer Name and Ticker or Trading Symbol PROKIDNEY CORP. [PROK]							(Ch	Relationship of eck all applications X	able)	g Pers	` '		
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/29/2023							Officer below)	(give title		Other (s below)	pecify	
C/O PROKIDNEY CORP 2000 FRONTIS PLAZA BOULEVARD, SUITE 250				4. If a	4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) WINSTON- SALEM NC 27103			Pu	Rule 10b5-1(c) Transaction Indication								Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)		1,	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																	
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			Execution Day/Year) if any		A. Deemed Execution Date, f any Month/Day/Year)				ties Acquired (A) on d Of (D) (Instr. 3, 4 a		Benefici Owned F	es Formally (D) (Following (I) (I		m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount (A) or (D)		Price		eported ransaction(s) nstr. 3 and 4)			Instr. 4)
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	e Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		C	Fransaction Code (Instr. 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficial Owned Following Reported	illy [10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				С	code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares		Transaction (Instr. 4)			
Director stock option (right to buy)	\$10.56	06/29/2023			A		48,128 ⁽¹⁾		(2)	0	06/29/2033	Class A Ordinary Shares	48,128	\$0.00	48,128	8	D	

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.

Remarks:

/s/ Todd Girolamo, attorney in fact

** Signature of Reporting Person Date

07/03/2023

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.