SEC Form 4																			
FORM 4 UNITED STA					ATE	TES SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549										OMB APPROVAL			
Section 16. Form 4 or Form 5 obligations may continue. See					iled pu	NT OF CHANGES IN BENEFICIAL OWNE d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									OMB Number Estimated av hours per re			erage burde	3235-0287 n 0.5
1. Name and Address of Reporting Person* <u>Meline David W</u>					2. <u>P/</u>	2. Issuer Name and Ticker or Trading Symbol <u>PACIFIC BIOSCIENCES OF</u> <u>CALIFORNIA, INC.</u> [PACB]									elationship o eck all applic Director	able)	g Pers	vner	
(Last) (First) (Middle) PACIFIC BIOSCIENCES OF CALIFORNIA, INC.						3. Date of Earliest Transaction (Month/Day/Year) 06/18/2024									below)	(give title		Other (: below)	specity
1305 O'BRIEN DRIVE (Street) MENLO PARK CA 94025					- 4.	Line)									loint/Group Filing (Check Applicable iled by One Reporting Person iled by More than One Reporting				
(City) (State) (Zip)					- R	Rule 10b5-1(c) Transaction Indication Image: 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. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7													7. Nature of						
1. Title of Security (Instr. 3) Date (Month/I					Execution Date,			, Transa Code (Transaction C Code (Instr.		Disposed Of (D) (Instr. 3, 4			4 and 5) Securities Beneficially Owned Fol		Form	: Direct Indirect str. 4)	Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	Price Reported Transactio (Instr. 3 an		on(s)		(Instr. 4)
Common Stock 06					8/202				Α		17,116		Α	\$ <mark>0</mark>	,	116		D	
	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) 22. 3. Transaction Derivative Or Exercise Price of Derivative Security			Execution Date, T if any C		4. Transa Code (8)				Expiration	6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares					

Explanation of Responses:

\$1.65

1. Each share is represented by a Restricted Stock Unit ("RSU"). The RSUs will vest on the one (1) year anniversary of the date of grant or, if earlier, on the date of the next annual meeting of the Company's stockholders occurring after the date of grant, provided such Reporting Person continues to serve as a director through the applicable vesting dates.

24,134

07/18/2024⁽²⁾

2. The shares subject to the option will vest monthly over one (1) year, on the same day of the month as the date of grant or, if earlier, on the date of the next annual meeting of the Company's stockholders occurring after the date of grant, provided such Reporting Person continues to serve as a director through the applicable vesting dates.

Remarks:

Stock Option (right to buy)

/s/ Michele Farmer, Attorney-

24,134

\$<mark>0</mark>

Common Stock

in-fact

06/18/2034

06/20/2024

24,134

D

** 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).

06/18/2024

** 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.

Α

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.