FORM 4

## **UNITED STATES SECU**

KIIIES A	AND EXCHANGE	COMMISSIO
\	D 0 00540	

Washington, D.C. 20549	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	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 is intended to satisfy the affirmative

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

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

1(c). See Ins	truction 10.	-									
1. Name and Address of Reporting Person*  Van Oene Mark  (Last) (First) (Middle)  PACIFIC BIOSCIENCES OF CALIFORNIA, INC.,				SSUER NAME AND THE CIFIC BIOS ALIFORNIA,  Date of Earliest Trans (16/2024	CIENCES INC. [ PA	Š ÓF ACB ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify below)  See Remarks				
1305 O'BRIE	1305 O'BRIEN DRIVE			f Amendment, Date	of Original Fil	ed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) MENLO PAF (City)	RK CA (State)	94025 (Zip)					. Interior	Form filed by On Form filed by Mo Person			
		Table I - N	on-Derivative	Securities Ac	quired, Di	sposed of, or Benef	icially	Owned			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/				2A. Deemed Execution Date, if any	3. Transaction Code (Instr.	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4)	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial			

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	e, Transaction Code (Instr.		4. Securities A Disposed Of (			5. Amount of Securities Beneficially 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)
Common Stock	08/16/2024		S		38,011(1)	D	\$1.662(2)	1,630,815	D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned										

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owr	ıed
(e.g., puts, calls, warrants, options, convertible securities)	

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/Year)			of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## **Explanation of Responses:**

- 1. Represents the number of shares automatically sold to cover tax withholding obligations in connection with the vesting of restricted stock units.
- 2. This sale price represents the weighted average sale price of the shares sold ranging from \$1.64 to \$1.69 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price within the range set forth in this Form 4.

## Remarks:

Chief Operating Officer

/s/ Michele Farmer, Attorneyin-fact

08/20/2024

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.