FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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* Farmer Michele						2. Issuer Name and Ticker or Trading Symbol PACIFIC BIOSCIENCES OF CALIFORNIA, INC. [PACB]									all app	o of Reportin dicable) tor er (give title	ng Per	rson(s) to Is 10% Ov Other (s	vner
(Last)	st) (First) (Middle) .CIFIC BIOSCIENCES OF CALIFORNIA, INC.					3. Date of Earliest Transaction (Month/Day/Year) 03/04/2024								X Officer (give title Officer (specify below) See Remarks					
1305 O'BRIEN DRIVE						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) MENLO PARK CA 94025														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)					Rul	Rule 10b5-1(c) Transaction Indication													
						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 - N	on-Deriva	tive S	Secui	rities	Acc	quirec	l, Dis	sposed of	, or E	Benefici	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					if any	eemed tion Date, n/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Disposed Of					and 5) Secu Bend Own		cially d 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	tock 03/04/2024						S		2,968(1)	D	\$4.87	71 ⁽²⁾ 21		7,216 ⁽³⁾		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exer ation D h/Day/		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities rlying ative ity (Instr. 4)	Der Sec	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	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 \$4.72 to \$5.22 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.
- 3. Includes 3,636 shares purchased on March 1, 2024 under the Company's 2010 Employee Stock Purchase Plan.

Remarks:

Chief Accounting Officer

/s/ Michele Farmer

03/06/2024

** Signature of Reporting Person

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.