FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

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* Glezer Eli N.						2. Issuer Name and Ticker or Trading Symbol Singular Genomics Systems, Inc. [ OMIC ]													ner	
(Last) (First) (Middle) 3010 SCIENCE PARK ROAD					3. Date of Earliest Transaction (Month/Day/Year) 08/09/2024									V	Officer (give title Other (specify below)  Chief Scientific Officer					
(Street) SAN DIEGO CA 92121					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City) (State) (Zip)						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 - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					action	ction 2A. Deemed Execution Date			3. 4. Sec Transaction Dispos Code (Instr. 5)		4. Secur Dispose	of, or Beneficia irities Acquired (A) or ed Of (D) (Instr. 3, 4 ar		() or	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock 08/09/					0/2024	/2024			Code M(1)	v	Amount 500	(D)	r	Price	Transact (Instr. 3	tion(s)		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)	3A. Deemed Execution I if any (Month/Day	Date,		ransaction ode (Instr.			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)		Date Exercisabl		xpiration ate	Title	or	ount nber ires						
Restricted Stock	(3)	08/09/2024			M			500	(4)	T	(4)	Common	50	00	(3)	7,000		D		

## **Explanation of Responses:**

- 1. Represents shares of Common Stock issued pursuant to settlement of vested Restricted Stock Units ("RSUs"). Each RSU represents a contingent right to receive one share of the Issuer's Common Stock.
- 2. On June 26, 2024, the Issuer effected a 1-for-30 reverse stock split of its common stock (the "Reverse Stock Split"). The amount of securities reported on this Form 4 have been adjusted to reflect the Reverse Stock Split.
- 3. Each RSU represents a contingent right to receive one share of the Issuer's Common Stock.
- 4. The RSUs vest in 16 equal quarterly installments over four years measured from February 9, 2024.

/s/ Dalen Meeter, Attorney-in-

**Fact** 

\*\* Signature of Reporting Person

Date

08/13/2024

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.