FORM 4

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

Washington,	D.C.	20540
vvasiiiigtoii,	D.C.	20048

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPI	OMB APPROVAL									
OMB Number:	3235-0287									
Estimated average b	urden									
hours per response.	0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b)

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Name and Address of Reporting Person*     Glezer Eli N.					2. Issuer Name and Ticker or Trading Symbol Singular Genomics Systems, Inc. [ OMIC ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner						
(Last) (First) (Middle) 3010 SCIENCE PARK ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/09/2024							)	below)	Officer (give title below)  Chief Scie		Other (s below)	pecify		
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SAN DII	EGO C	A	92121		,										)		led by Mor		orting Persor n One Repor	
(City)	(S	tate)	(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 intensatisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										nat is intended	to									
		Tab	le I - Nor	n-Deriv	ativ	e Se	curit	ies Ac	quir	red, D	isp	osed o	f, or B	ene	eficiall	y Owned	İ			
1. Title of Security (Instr. 3) 2. Trans Date (Month/l					action 2A. Deemed Execution Date, if any (Month/Day/Yea		, Transaction Disposed Code (Instr. 5)		rities Acquired (A) o d Of (D) (Instr. 3, 4			5. Amou Securitie Beneficia Owned F	es For ially (D) Following (I) (		n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									С	Code V	'	Amount	(A) (D)	or	Price	Transact (Instr. 3 a	tion(s)			(Instr. 4)
Common Stock 05/0						4			N	M <sup>(1)</sup>		15,00	0	1	(1)	4,600,000			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)	Execution D		Date, Transaction				Expiration Date (Month/Day/Year)				7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owner Form Direct or Ind (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	e rcisable		xpiration ate	Title	O N O	lumber					
Restricted Stock Units	(2)	05/09/2024			M			15,000		(3)		(3)	Commo	n 1	5,000	(2)	225,00	00	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. Each RSU represents a contingent right to receive one share of the Issuer's Common Stock.
- 3. The RSUs vest in 16 equal quarterly installments over four years measured from February 9, 2024.

/s/ Dalen Meeter, Attorney-in-

Fact

05/13/2024

\*\* 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.