FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	

OMB APPROVAL

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287	
ON THE MENT OF ON THE OF THE OWNER O	Estimated average burden		
Filed pursuant to Cootion 16(a) of the Coopyrition Evaluation Act of 1034	hours per response:	0.5	

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 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 defense conditions of Rule 10b5-1(c). See Instruction 10. 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 ar		Reporting Person*							er or Trad							Person(s) to Is	suer				
Schaefe	er Thoma	<u>s J.</u>			$ \underline{\mathbf{A}} $	rcac	lia Bios	scier	ices, In	<u>c.</u> [RKDA		(Ch	eck all appli Directo	,	10% C	wner				
					. L								[Officer below)	(give title	Other below)	specify				
(Last)	`	irst)	3. Date of Earliest Transaction (Month/Day/Year) 08/19/2024								Chief Executive Officer										
		OSCIENCES, IN	IC.			, 15, 2															
5950 SHERRY LANE, SUITE 215							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)					1		,				(.,,	Line	e)	•						
DALLA	S T	X	75225												,	Reporting Person					
-					-									Persor		man One Rep	orung .				
(City)	(S	tate)	(Zip)																		
		Tab	le I - Non	-Deriv	ativ	e Se	curities	s Ac	quired,	Disp	osed o	f, or Be	neficial	y Owned	ı						
		2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 5)		ed (A) or tr. 3, 4 and	Benefici	es Form ally (D) of Following (I) (II	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership								
						Code	٧	Amount	(A) oi (D)	Price	Transact	ion(s)		(Instr. 4)							
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
	1		(e.g., p	outs,	call			<u> </u>			ble secu		1							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Execution Date, (Month/Day/Year) if any			ransaction of ode (Instr. Derivative		ive ies ed ed nstr.	6. Date Exercisable ar Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficia Ownershi (Instr. 4)					
					Code	v	(A)		Date Exercisabl		expiration Pate	Title	Amount or Number of Shares								
Stock Option (Right to Buy)	\$2.71	08/19/2024			A		20,000		(1)	0	8/19/2034	Common Stock	20,000	\$0.00	25,475	D					

Explanation of Responses:

1. The options were granted on 8/19/2024 and the vesting occurs as follows, subject to the Participant's continued service: (1) 25% of the shares vest on the first anniversary of the date of the award and (2) 75% of the shares vest in 36 equal installments, the first installment occurring on the last day of the month in which the initial vesting date occurs.

Thomas J. Schaefer, by Attorney-in-fact, Solaeta Chan

08/21/2024

** 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).
- ** 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.