SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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

See

Footnote⁽²⁾

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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).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 [*] NOHRA GUY P			2. Issuer Name and Ticker or Trading Symbol Bioventus Inc. [BVS]						elationship of Repor ck all applicable) Director	0 ()	to Issuer			
(Last) (First) (Middle)				8. Date of Earliest Tran 08/16/2023	isaction	(Mont	h/Day/Year)		Officer (give titl below)	e Othe belo	er (specify w)			
4721 EMPEROR BOULEVARD, SUITE 100				4. If Amendment, Date of Original Filed (Month/Day/Year) 08/18/2023						6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)										Form filed by C	one Reporting P	erson		
DURHAM	NC	27703								Form filed by M Person	lore than One F	Reporting		
(City)	(State)	(Zip)		Rule 10b5-1(c	0b5-1(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-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
Date		2. Transaction Date (Month/Day/Ye	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
					v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130. 4)			

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

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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)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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:

Class A Common Stock

1. Represents a pro rata in-kind distribution of common stock of the Issuer by Alta Partners Management VIII, LLC, without consideration, to its members, including the Reporting Person in connection with the winding down of the operations of Alta Partners VIII, L.P.

2. The reported shares are held by Alta Partners VIII, L.P. Alta Partners Management VIII, LLC is the general partner of Alta Partners VIII, L.P. The Reporting Person is one of the managing directors and a member of Alta Partners Management VIII, LLC and shares voting and dispositive power with respect to the shares held by Alta Partners VIII, L.P. The Reporting Person disclaims beneficial ownership of the shares reported herein except to the extent of his proportionate pecuniary interest therein.



08/23/2023

** 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).

08/16/2023

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.