FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL									
OMB Number: 3235-0287									
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houre per response	0.5								

Check this box to indicate that a transaction was made pursuant to 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-
delense conditions of Rule 1005-

Instruction 1(b).

1(c). Si	ee Instruction	10.																	
Name and Address of Reporting Person*  Egholm Michael			2. Issuer Name and Ticker or Trading Symbol STANDARD BIOTOOLS INC. [ LAB ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)										
Egnomi wichaei											-	•	1	Direc	tor		10% Ov	vner	
,														V		er (give title		Other (s	specify
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)								below) below)  President & CEO						
C/O STA	NDARD I	BIOTOOLS INC.	•		02/20/2025							President & CEO							
2 TOWER PLACE, STE 2000																			
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
SOUTH	SAN C		4000											Form filed by One Reporting Person					
FRANCI	ISCO C.	A 9	4080										Form filed by More than One Reporting Person						
(City)	(S	tate) (Z	Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	iciall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)			Execution Date,		Date,	3. Transaction Code (Instr. 8)  4. Securities Acquii Disposed Of (D) (In		iired (A nstr. 3,	) or 4 and	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) (D)	or P	rice	Transa	ported insaction(s) str. 3 and 4)			(Instr. 4)	
Common Stock 02/20/2				2025				F		31,031(1)	I	) ;	\$1.39	39 1,447,673 <sup>(2)</sup>			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)	Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		ion Date,	Code (Instr.		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 (Ins 3 and 4)		De Se (In	erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi ct (Instr. 4)		
			Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	er							

## **Explanation of Responses:**

- 1. The shares were withheld from the reporting person to satisfy the tax withholding obligations that arose upon the vesting of restricted stock units granted to the reporting person on May 20, 2024, which grant was originally reported on Form 4 filed with the U.S. Securities and Exchange Commission on May 21, 2024.
- 2. Includes 5,000 shares of common stock acquired by the reporting person on May 31, 2024 under the Issuer's Employee Stock Purchase Plan.

/s/ Michael Egholm by

Agnieszka Gallagher,

Attorney-in-Fact

\*\* Signature of Reporting Person Date

02/24/2025

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.