FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
--

OMB APPROVAL							
OMB Number: 3235-028							
Estimated average burden							
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).

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

Name and Address of Reporting Person* Parker Craig C		2. Issuer Name and Ticker or Trading Symbol Surrozen, Inc./DE [SRZN]							(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
- Turker	<u>Craig C</u>													Officer	give title		Owner r (specify	
(Last)	(Fi	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/24/2024							below)	.0	belo	v)			
C/O SURROZEN, INC.				04/24/2024								Chief Executive Officer						
171 OYSTER POINT BLVD., SUITE 400			4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														Y Form fi	ed by One F	Reporting Pe	son	
SOUTH FRANCI	· · · · · · · · · · · · · · · · · · ·	A	94080		L									Form fi Person	ed by More	than One Re	porting	
-					R	Rule 10b5-1(c) Transaction Indication												
(City)	(Si	tate)	(Zip)		Check this box to indicate that a transaction was made pursuant to a the affirmative defense conditions of Rule 10b5-1(c). See Instruction													
		Tat	ole I - Non	-Deriv	ativ	e Se	curitie	s Ac	quired, E	isp	osed of	f, or Be	neficiall	y Owned				
1. Title of Security (Instr. 3) 2. Trans: Date (Month/I				2A. Deemed Execution Date if any (Month/Day/Yo		Date	e, Transaction Dispo		Disposed	rities Acquired (A) or ed Of (D) (Instr. 3, 4 ar		5. Amour Securitie Beneficia Owned F	s F illy (i	. Ownership form: Direct D) or Indirec I) (Instr. 4)	7. Nature Indirect Beneficia Ownersh	al		
							. ,		Code	,	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Conversion or Exercise (Instr. 3) Conversion Date Execution Date (Month/Day/Year) Price of Derivative Security Security Date (Month/Day/Year) (Month/Day/Year)		ate, Transaction Code (Instr.		of E		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)	Owners Form: Direct or India (I) (Inst	hip of Indi Benefi O) Owner ect (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
				c	ode	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares					
Option (right to buy)	\$8.97	04/24/2024			A		43,000		02/01/2024 ⁽¹) ()4/24/2034	Common Stock	43,000	\$0	43,000	D		

Explanation of Responses:

1. The shares subject to the options vest and become exercisable in a series of 48 equal monthly installments beginning on February 1, 2024, subject to the reporting person's continuous service through the applicable vesting date.

Remarks:

/s/Charles Williams, Attorneyin-Fact for Craig C Parker

04/26/2024

** 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.