Ш

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

]	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 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.

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 Add	•	Ū		2. Issuer Name and Ticker or Trading Symbol <u>Mineralys Therapeutics, Inc.</u> [MLYS]							nship of Reporting Person(s l applicable) Director X					
(Last)	(First)	,		3. Date of Earliest Transaction (Month/Day/Year) 05/22/2024						Officer (g below)	ive title	А	Other (s below)			
628 MIDDLEFIELD ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) PALO ALTO CA 94301										x		d by One F d by More	•	ig Person ne Reportin	g Person	
(City)	(State	e) (Zip)													
		Т	able I - Non-	Derivative S	ecurities Acq	uired, I	Dispo	osed of	, or Benefi	cially Ow	ned					
Date			2. Transaction Date Month/Day/Year)	Execution Date, Transaction Disposed Of (D) (Instr. 3, 4					and 5) Securities Beneficially Own Following Report			nership Direct (D) rect (I) 4)	7. Nature of Indirect Beneficial Ownership			
					Code	v	Amount	(A) or (D)	Price	Transactio (Instr. 3 an				(Instr. 4)		
					urities Acqui s, warrants, o						ed					
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/Yea	Code (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4	6. Date E Expiratio (Month/D	n Date		7. Title and A Securities Un Derivative Se 3 and 4)	derlying	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following	s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

3)	Price of Derivative Security		(Month/Day/Year)	8)		Acquired Dispose (D) (Instr and 5)	d of			3 and 4)		(Instr. 5)	Owned Following Reported	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Stock Option	\$12.52	05/22/2024		Α		22,000		(1)	05/22/2034	Common Stock	22,000	\$0	22,000	D		

1. Name and Addres	s of Reporting Person *	
<u>AKKARAJU</u>	<u>SRINIVAS</u>	
(Last)	(First)	(Middle)
628 MIDDLEFIE	ELD ROAD	
(Street)		
PALO ALTO	CA	94301
(City)	(State)	(Zip)
1. Name and Addres	s of Reporting Person *	
Samsara BioC	Capital, L.P.	
(Last)	(First)	(Middle)
628 MIDDLEFIE	ELD ROAD	
(Street)		
PALO ALTO	CA	94301
(City)	(State)	(Zip)

Explanation of Responses:

1. The stock option award vests in 12 substantially equal monthly installments beginning on June 22, 2024. In the event that the next annual meeting of stockholders occurs prior to May 22, 2025, any remaining unvested portion of the stock option award will vest on the date of such meeting.

Remarks:

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.