## FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| Ji | KI I | 112 | ANU | EXCHANGE | COMINISSION |
|----|------|-----|-----|----------|-------------|
|    |      |     |     |          |             |

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |  |

hours per response:

0.5

**Beneficial** Ownership (Instr. 4)

(D) or Indirect

D

D

(I) (Instr. 4)

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5           |
| obligations may continue. See          |
| Instruction 1(h)                       |

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

| 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.  |

| 1. Name and Addre Paone Antoir   | , ,                 | Person*                     |               | er Name <b>and</b> Ticke<br>eration Bio C |                   |   |  | tionship of Reportir<br>all applicable)<br>Director | 10% (                        | ssuer<br>Owner        |  |  |
|--|---------------------|-----------------------------|---------------|---|-------------------|---|--|---|------------------------------|-----------------------|--|--|
| (Last) C/O GENERAT   | (First) ION BIO CO. | (Middle)<br>, 301 BINNEY ST | 3. Date 01/15 | e of Earliest Transa<br>/2025             | ction (Month/E    | Day/Year)   | V  | Officer (give title below)  CHIEF OPERA             | below                        | ′                     |  |  |
| (Street) CAMBRIDGE MA 02142  |                     |                             |               | mendment, Date of                         | Original Filed    | (Month/Day/Year)  | 6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting |   |                              |                       |  |  |
| (City)   | (State)             | (Zip)                       |               |   |                   |   |  | Person  |                              |                       |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |                     |                             |               |   |                   |   |  |   |                              |                       |  |  |
| 1. Title of Security (Instr. 3) 2. Trans:  |                     |                             |               | 2A. Deemed<br>Execution Date,             | 3.<br>Transaction | 4. Securities Acquired (A<br>Disposed Of (D) (Instr. 3, |  | 5. Amount of<br>Securities                          | 6. Ownership<br>Form: Direct | 7. Nature of Indirect |  |  |

Code (Instr.

8)

Code

M

F

(Month/Day/Year)

(Month/Day/Year)

01/15/2025

01/15/2025

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

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transaction<br>Code (Instr.<br>8) |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |       | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|---|--|--------------------------------------|---|---|---|---|-------|--|--------------------|--|--|---|--|--|--|
|   |  |                                      |   | Code                                    | v | (A)   | (D)   | Date<br>Exercisable  | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |  |  |  |
| Restricted<br>Stock<br>Units                        | (1)  | 01/15/2025                           |   | M                                       |   |   | 1,592 | (2)  | (2)                | Common<br>Stock  | 1,592                                  | \$0   | 12,732   | D  |  |

## **Explanation of Responses:**

Common Stock

Common Stock

- 1. Each restricted stock unit represents the right to receive one share of the company's common stock.
- 2. On January 20, 2023, the reporting person was granted 25,467 restricted stock units. The shares underlying the restricted stock units vest over four years, with 25% of the shares vested on January 15, 2024 and the remaining shares vesting in equal quarterly installments thereafter.

/s/ Shawna-Gay White, Attorney-in-Fact

(A) or (D)

A

D

Price

(1)

\$0.888

Amount

1,592

552

01/17/2025

Beneficially

Owned Following

22,510

21,958

Reported Transaction(s)

(Instr. 3 and 4)

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.