FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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*  Ho Maykin  (Last) (First) (Middle)  C/O NEUMORA THERAPEUTICS, INC. 490 ARSENAL WAY, SUITE 200  (Street)  WATERTOWN MA 02472					3. E 06/	2. Issuer Name and Ticker or Trading Symbol Neumora Therapeutics, Inc. [ NMRA ]  3. Date of Earliest Transaction (Month/Day/Year) 06/13/2024  4. If Amendment, Date of Original Filed (Month/Day/Year)  Rule 10b5-1(c) Transaction Indication								(Ched	Officer (give title below)  Other (specify below)  ividual or Joint/Group Filing (Check Applicable				
(City) (State) (Zip)					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.														
		Tab	le I - Non	-Deriv	vative	e Se	curities	s Ac	quired,	Dis	osed o	f, or Be	nef	icially	Owned				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 an			5. Amou Securitie Benefici Owned F Reported	es ally Following	Form (D) o	r Indirect	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	nt (A) or (D)		Price	Transact (Instr. 3	tion(s)			Instr. 4)
Common Stock 06/13/				3/202	/2024		A		20,100	20,100 <sup>(1)</sup> A		<b>\$</b> 0	20	,100		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		expiration Date	Title	or Nu of	nount imber ares					
Stock Option (Right to Buy)	\$9.95	06/13/2024			A		28,571		(2)	0	6/12/2034	Common Stock	28	3,571	\$0	28,571	l	D	

## Explanation of Responses:

1. Constitute restricted stock units ("RSUs") for which the Reporting Person is entitled to receive one (1) share of Common Stock for each RSU upon vesting. 100% of the RSUs shall vest on the earlier of (i) one year anniversary of June 13, 2024 or (ii) immediately prior to the next Annual Meeting following June 13, 2024.

2. 100% of the shares subject to the option shall vest on the earlier of (i) one year anniversary of June 13, 2024 or (ii) immediately prior to the next Annual Meeting following June 13, 2024.

/s/ Joshua Pinto, as Attorneyin-Fact for Maykin Ho 06/14/2024

\*\* 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.