FORM 3

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

Washington, D.C. 20549

## OMB APPROVAL

3235-0104 OMB Number:

Estimated average burden

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#### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

	01 36	C(1011 30(11) 0	f the Investment Company	ACL 01 1340				
1. Name and Address of Reporting Person Northpond Ventures II GP, LLC	Requirin	g Statement Day/Year)	3. Issuer Name and Ticker or Trading Symbol <u>Camp4 Therapeutics Corp</u> [ CAMP ]					
(Last) (First) (Middle) 7500 OLD GEORGETOWN ROAD SUITE 800	<b>)</b> ,		4. Relationship of Repolssuer (Check all applicable) Director Officer (give title below)	<b>▼</b> 10% C	File owner (specify (Ch	ed (Month/Day/ ndividual or Jo neck Applicable Form filed	int/Group Filing	
(Street) BETHESDA MD 20814					S	Person Form filed Reporting I	by More than One Person	
(City) (State) (Zip)								
	Table I - N	on-Deriva	tive Securities Ben	eficially O	wned			
1. Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Ins 4)		Direct Own	. Nature of Indirect Beneficial Ownership (Instr. 5)			
(e			re Securities Benefi ants, options, conv					
	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		1	5. Ownership Form:		
Title of Derivative Security (Instr. 4)	<b>Expiration Da</b>	ate	Underlying Derivative S		4. Conversion or Exercise	Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
Title of Derivative Security (Instr. 4)	<b>Expiration Da</b>	ate	Underlying Derivative S		Conversion	Ownership	Indirect Beneficial	
1. Title of Derivative Security (Instr. 4)  Series A Prime Preferred Stock	Expiration Da (Month/Day/)	ate (ear) Expiration	Underlying Derivative S (Instr. 4)	Amount or Number of	Conversion or Exercise Price of Derivative	Ownership Form: Direct (D) or Indirect	Indirect Beneficial Ownership (Instr.	
, ,	Expiration Da (Month/Day/\) Date Exercisable	Expiration	Underlying Derivative S (Instr. 4)  Title	Amount or Number of Shares	Conversion or Exercise Price of Derivative Security	Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Indirect Beneficial Ownership (Instr. 5)  By Northpond Ventures II,	
Series A Prime Preferred Stock	Expiration Da (Month/Day/N Date Exercisable	Expiration Date	Underlying Derivative S (Instr. 4)  Title  Common Stock	Amount or Number of Shares	Conversion or Exercise Price of Derivative Security	Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Indirect Beneficial Ownership (Instr. 5)  By Northpond Ventures II, LP <sup>(2)</sup> By Northpond	
Series A Prime Preferred Stock  Series B Preferred Stock  1. Name and Address of Reporting Person  Northpond Ventures II GP, L	Expiration Da (Month/Day/N Date Exercisable	Expiration Date	Underlying Derivative S (Instr. 4)  Title  Common Stock	Amount or Number of Shares	Conversion or Exercise Price of Derivative Security	Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Indirect Beneficial Ownership (Instr. 5)  By Northpond Ventures II, LP <sup>(2)</sup> By Northpond	

# (City) (State) (Zip) 1. Name and Address of Reporting Person\* Northpond Ventures II, LP (First) (Last) (Middle) 7500 OLD GEORGETOWN ROAD, SUITE 800 (Street) **BETHESDA** 20814 MD (City) (State) (Zip)

1. Name and Address of Reporting Person*  Northpond Ventures GP, LLC								
l ` ′	(First) ORGETOWN	(Middle) ROAD, SUITE 800						
(Street) BETHESDA	MD	20814						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person*  Northpond Ventures, LP								
(Last) 7500 OLD GEO	(First) ORGETOWN	(Middle) ROAD, SUITE 800						
(Street) BETHESDA	MD	20814						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* <u>Rubin Michael P.</u>								
(Last) C/O NORTHPO 7500 OLD GEO		(Middle) RES ROAD, SUITE 800						
(Street) BETHESDA	MD	20814						
(City)	(State)	(Zip)						

#### **Explanation of Responses:**

- 1. Each share of Series A Prime Preferred Stock and Series B Preferred Stock (collectively, the "Preferred Stock") is convertible into shares of Common Stock of the Issuer on a 11.2158-for-one basis without payment of further consideration. Upon the closing of the Issuer's initial public offering, the Preferred Stock will convert into the number of shares of Common Stock of the Issuer shown in column 3. The Preferred Stock has no expiration date.
- 2. The shares are held directly by Northpond Ventures II, LP ("Northpond Fund II"). Northpond Ventures II GP, LLC ("Northpond GP II") is the general partner of Northpond Fund II, and Michael P. Rubin is the managing member of Northpond GP II. As a result, each of Northpond GP II and Mr. Rubin may be deemed to share beneficial ownership with respect to the shares held of record by Northpond Fund II. Each of Northpond GP II and Mr. Rubin disclaim beneficial ownership of the securities held by Northpond Fund II, except to the extent of such Reporting Person's pecuniary interest therein, if any.
- 3. The shares are held directly by Northpond Ventures, LP ("Northpond Fund I"). Northpond Ventures GP, LLC ("Northpond GP I") is the general partner of Northpond Fund I, and Michael P. Rubin is the managing member of Northpond GP I. As a result, each of Northpond GP I and Mr. Rubin may be deemed to share beneficial ownership with respect to the shares held of record by Northpond Fund I. Each of Northpond GP I and Mr. Rubin disclaim beneficial ownership of the securities held by Northpond Fund I, except to the extent of such Reporting Person's pecuniary interest therein, if any.

Northpond Ventures II GP, LLC, By: /s/ Patrick Smerkers, Authorized Signatory	10/10/2024
Northpond Ventures II, LP, By: Northpond Ventures II GP, LLC, its general partner, By: /s/ Patrick Smerkers, Authorized Signatory	10/10/2024
Northpond Ventures GP, LLC, By: /s/ Patrick Smerkers, Authorized Signatory	10/10/2024
Northpond Ventures, LP, By: Northpond Ventures GP, LLC, its general partner, By: /s/ Patrick Smerkers, Authorized Signatory	10/10/2024

/s/ Michael P. Rubin

10/10/2024

\*\* Signature of Reporting

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 5 (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.