FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
racinington,			

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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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* Valantine Hannah					2. Issuer Name and Ticker or Trading Symbol BridgeBio Pharma, Inc. [BBIO]									(Ch	eck all appli	ionship of Reporting all applicable) Director		son(s) to Iss 10% Ov		
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/15/2024											Office below	give title		Other (s below)	specify
C/O BRIDGEBIO PHARMA, INC. 3160 PORTER DR., SUITE 250				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) PALO ALTO CA 94304					Form filed by More than One Reporting Person															
(City)	(S	tate)	(Zip)		Rı	Rule 10b5-1(c) Transaction Indication X 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.										ed to				
		Tab	le I - No	n-Deriv	vative	e Se	curit	ies Ac	qu	ired,	Dis	posed o	of, or	Ben	eficial	ly Owne	d			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		,	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			l (A) or . 3, 4 and	Benefic Owned	es ially Following	Form (D) o	n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A (D) or)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common Stock				02/1:	02/15/2024					M ⁽¹⁾		2,91	5	A	\$8.4	5 4	,679		D	
Common	Stock 0.				5/2024	/2024			S ⁽¹⁾		2,915	5	D	\$37.7	75 1.	1,764		D		
Common Stock																3,	,433			By Spouse
		7	able II -									osed of onverti				Owned				'
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (8)				Exp	6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Securities Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Expiration (D) Exercisable Date 1		Title	N C	Amount or Number of Shares							
Stock Option (right to buy)	\$8.45	02/15/2024			M ⁽¹⁾			2,915		(2)	0	6/22/2032	Comm		2,915	\$0	93,261	1	D	

Explanation of Responses:

- 1. This transaction was effected pursuant to a Rule 10b5-1 sales plan adopted by the Reporting Person on August 16, 2023.
- 2. 1/3rd of the shares underlying the option vested on June 22, 2023; thereafter, 1/3rd of the underlying shares vest on an annual basis, so that all of the underlying shares will be vested on June 22, 2025, subject to the optionee's continued service on the Board of Directors of the Company.

/s/ Brian C. Stephenson, Attorney-in-Fact

02/20/2024

** 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.