

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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* <u>KKR Genetic Disorder L.P.</u> <hr/> (Last) (First) (Middle) <u>C/O KOHLBERG KRAVIS ROBERTS &amp; CO. L.P.</u> <u>30 HUDSON YARDS</u> <hr/> (Street) <u>NEW YORK NY 10001</u> <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>BridgeBio Pharma, Inc. [ BBIO ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>02/17/2021</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	
		6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	02/17/2021		S		3,450,000	D	\$60.4688 <sup>(1)</sup>	31,060,971	I	See footnotes <sup>(1)(2)(3)</sup>

**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 Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person* <u>KKR Genetic Disorder L.P.</u> <hr/> (Last) (First) (Middle) <u>C/O KOHLBERG KRAVIS ROBERTS &amp; CO. L.P.</u> <u>30 HUDSON YARDS</u> <hr/> (Street) <u>NEW YORK NY 10001</u> <hr/> (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>KKR Genetic Disorder GP LLC</u> <hr/> (Last) (First) (Middle) <u>C/O KOHLBERG KRAVIS ROBERTS &amp; CO. L.P.</u> <u>30 HUDSON YARDS</u> <hr/> (Street) <u>NEW YORK, NY 10001</u> <hr/> (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>KKR Group Partnership L.P.</u> <hr/> (Last) (First) (Middle) <u>C/O KOHLBERG KRAVIS ROBERTS &amp; CO. L.P.</u>

30 HUDSON YARDS

(Street)

NEW YORK NY 10001

(City)

(State)

(Zip)

1. Name and Address of Reporting Person\*

[KKR Group Holdings Corp.](#)

(Last)

(First)

(Middle)

C/O KOHLBERG KRAVIS ROBERTS & CO. L.P.

30 HUDSON YARDS

(Street)

NEW YORK NY 10001

(City)

(State)

(Zip)

1. Name and Address of Reporting Person\*

[KKR & Co. Inc.](#)

(Last)

(First)

(Middle)

C/O KOHLBERG KRAVIS ROBERTS & CO. L.P.

30 HUDSON YARDS

(Street)

NEW YORK NY 10001

(City)

(State)

(Zip)

1. Name and Address of Reporting Person\*

[KKR Management LLP](#)

(Last)

(First)

(Middle)

C/O KOHLBERG KRAVIS ROBERTS & CO. L.P.

30 HUDSON YARDS

(Street)

NEW YORK NY 10001

(City)

(State)

(Zip)

1. Name and Address of Reporting Person\*

[KRAVIS HENRY R](#)

(Last)

(First)

(Middle)

C/O KOHLBERG KRAVIS ROBERTS & CO. L.P.

30 HUDSON YARDS

(Street)

NEW YORK NY 10001

(City)

(State)

(Zip)

1. Name and Address of Reporting Person\*

[ROBERTS GEORGE R](#)

(Last)

(First)

(Middle)

C/O KOHLBERG KRAVIS ROBERTS & CO. L.P.

2800 SAND HILL ROAD, SUITE 200

(Street)

MENLO PARK CA 94025

(City)

(State)

(Zip)

**Explanation of Responses:**

1. This amount represents the \$62.50 secondary public offering price per share of common stock of BridgeBio Pharma, Inc. ("Common Stock") less the underwriting discount of \$2.03125 per share for shares sold pursuant to an underwritten public offering

2. The securities of the Issuer are held by KKR Genetic Disorder L.P. KKR Genetic Disorder GP LLC, as the general partner of KKR Genetic Disorder L.P., KKR Group Partnership L.P., as the sole member of KKR Genetic Disorder GP LLC, KKR Group Holdings Corp., as the general partner of KKR Group Partnership L.P., KKR & Co. Inc., as the sole shareholder of KKR Group Holdings Corp.,

KKR Management LLP, as the Series I preferred stockholder of KKR & Co. Inc., and Messrs. Henry R. Kravis and George R. Roberts, as the founding partners of KKR Management LLP, may be deemed to be the beneficial owners having shared voting and investment power with respect to the shares described above. Each of Messrs. Kravis and Roberts disclaims beneficial ownership of the shares held by KKR Genetic Disorder L.P.

3. Each of the Reporting Persons disclaims beneficial ownership of the securities reported herein, except to the extent of such Reporting Person's pecuniary interest therein. The filing of this statement shall not be deemed to be an admission that, for purposes of Section 16 of the Securities Exchange Act of 1934 or otherwise, the Reporting Persons are the beneficial owners of any securities reported herein.

KKR GENETIC DISORDER  
L.P., By: KKR Genetic  
Disorder GP LLC, its general  
partner, By: /s/ Terence P. 02/17/2021  
Gallagher, Name: Terence P.  
Gallagher Title: Attorney-in-

fact for Robert H. Lewin,  
Chief Financial Officer

KKR GENETIC DISORDER  
GP LLC, By: /s/ Terence P. 02/17/2021  
Gallagher, Name: Terence P.  
Gallagher Title: Attorney-in-

fact for Robert H. Lewin,  
Chief Financial Officer

KKR GROUP  
PARTNERSHIP L.P., By:  
KKR Group Holdings Corp.,  
its general partner, By: /s/ 02/17/2021  
Terence P. Gallagher, Name:  
Terence P. Gallagher Title:

Attorney-in-fact for Robert H.  
Lewin, Chief Financial Officer

KKR GROUP HOLDINGS  
CORP., By: /s/ Terence P. 02/17/2021  
Gallagher, Name: Terence P.  
Gallagher Title: Attorney-in-

fact for Robert H. Lewin,  
Chief Financial Officer

KKR & CO. INC., By: /s/  
Terence P. Gallagher, Name: 02/17/2021  
Terence P. Gallagher Title:  
Attorney-in-fact for Robert H.  
Lewin, Chief Financial Officer

KKR MANAGEMENT LLP,  
By: /s/ Terence P. Gallagher,  
Name: Terence P. Gallagher 02/17/2021  
Title: Attorney-in-fact for  
Robert H. Lewin, Chief

Financial Officer

HENRY R. KRAVIS, By: /s/  
Terence P. Gallagher, Name: 02/17/2021  
Terence P. Gallagher, Title:  
Attorney-in-fact

GEORGE R. ROBERTS, By:  
/s/ Terence P. Gallagher, 02/17/2021  
Name: Terence P. Gallagher,  
Title: Attorney-in-fact

\*\* 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.**