FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

vasimigton,	D.O. 200-0	

	OMB APPROVAL										
	OMB Number:	3235-0287									
OMB Number: 3235-02 Estimated average burden	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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

(Last)	T CHING	rst) ((Middle)		2. Issuer Name and Ticker or Trading Symbol BridgeBio Pharma, Inc. [BBIO] 3. Date of Earliest Transaction (Month/Day/Year) 11/16/2020									(Che	5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% Ow X Officer (give title below) Chief Accounting Officer					
(Street) PALO A (City)		tate) (94301 (Zip)	n Doriv		4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Line) X Form filed by One Report Form filed by More than One Person										orting Perso	n			
1. Title of Security (Instr. 3) 2. Trans Date			2. Transa	action	ction 2A. Deemed Execution Date,		Code (Instr. 5)			red (A) or 5. Amount of		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									c	Code V	'	Amount	it (A) or (D) Pr		Price	Transac (Instr. 3	tion(s)			(1115411.4)
Common Stock 11/16			11/16	/2020	2020			М		5,493 A			(1)	6,	6,486		D			
Common Stock 11/16			/2020	2020			F		1,900 ⁽²⁾ D) :	\$44.3	4,586			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. Deeme Execution if any (Month/Day	Date,		ransaction ode (Instr.		of		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e ercisable		xpiration ate	Title	or Nu of	nount mber ares					
Restricted Stock Units	(1)	11/16/2020			M			399		(3)		(3)	Commo	3	399	\$0.00	5,586		D	
Restricted																				1

(1)

- 1. Each Restricted Stock Unit ("RSU") represents a contingent right to receive one share of the Issuer's Common Stock.
- 2. Represents number of shares of the Issuer's Common Stock withheld to satisfy the Reporting Person's tax obligations in connection with the vesting of 5,493 shares of Common Stock underlying the Reporting Person's RSUs.

5,094

3. The RSUs vest over approximately four years with a vesting commencement date of May 16, 2020 and have no expiration date. 6.25% of the RSUs vested on August 16, 2020 and November 16, 2020 an additional 6.25% will vest in quarterly installments on the 16th day of each February, May, August and November thereafter, subject to the Reporting Person's continued service with the Issuer or any of its subsidiaries through each vesting date.

(4)

4. The RSUs vested as to 25% of the units on November 16, 2020 and as to 1/12th of the units each quarter thereafter for three additional years, subject to the Reporting Person's continuous service with the Issuer or any of its subsidiaries through each such vesting date, and have no expiration date.

Remarks:

Stock

/s/ Tara Condon, Attorney-in-

5,094

\$0.00

11/18/2020

15,282

D

Fact

Common

(4)

** 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).

11/16/2020

** 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.