FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APP	PROVAL
WNERSHIP	OMB Number:	3235-0287

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 OV

Estimated average burden hours per response: 0.5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Wallace Max N.					2. Issuer Name and Ticker or Trading Symbol Humacyte, Inc. [HUMA]										tionship all appl Direct	icable)	•				
(Last)	`	(First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/20/2024											Officer (give title below)			Other (below)	specify	
2525 EAST NORTH CAROLINA HIGHWAY 54			AY 54	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) DURHA	M NO	2	27713												X		filed by Mo		orting Pers in One Rep	- 1	
(City)	(Sta	ate) (2	Zip)		Rul	e 10)b5-	-1(c)	Trans	sact	ion Indi	catio	on								
					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.										nded to						
		Table	l - Nor	n-Deriva	tive S	ecui	rities	s Acq	uired,	Disp	osed of,	or E	Bene	ficia	ally	Owne	ed				
''' ''' '		2. Transaction Date (Month/Day/Year)		Exec if an	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				3, 4 and Secu Bene Own			ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)		Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			05/20/2	2024				Р		4,015	I	A	\$6.2	1	4,	,015		I	Max Wallace SEP IRA	
Common Stock			05/20/2	05/20/2024				P		3,990	A	Λ.	\$6.29		3,990			I	Max N Wallace IRA		
Common Stock															56	,550		D			
		Tal									osed of, o)wned	i				
1. Title of 2. 3. Transaction Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) Grant Conversion Date, If any				4.	5. Num		vative urities uired or oosed 0)		Exerci on Dat	sable and 7. Title Amo Secu Unde Deriv		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 Exercisa	able	Expiration Date	Title	Amo or Num of Shar	ber							

Explanation of Responses:

Remarks:

/s/ Max N. Wallace by Dale A. Sander as Attorney-in-Fact

05/21/2024

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).