SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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>DeLena Mary Beth</u>			2. Date of E Requiring S (Month/Day 01/15/202	itatement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>PepGen Inc.</u> [PEPG]					
(Last) C/O PEPGH 321 HARRI (Street) BOSTON (City)		(Middle) 3TH FLOOR 02118 (Zip)			Issuer	ationship of Reporting k all applicable) Director Officer (give title below) General Co	10% C Other below)	wner (specify	A Person	Year) int/Group Filing ∋ Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)						unt of Securities ially Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
······································			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Se (Instr. 4)			4. Conversion or Exercise Price of	e Form:	6. Nature of Indirect Beneficial Ownership (Instr.
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)

Explanation of Responses:

Remarks:

Exhibit 24: Power of Attorney

No securities are beneficially owned.

/s/ Noel Donnelly, as Attorney-in-Fact ** Signature of Reporting Person

01/17/2024

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 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.