| SEC For  | n 4<br>FORM                        | л                             |                        |  | <u>лт</u>                                     | =5 9  | SEC                               |  | S AN  |       | ХСНА               | NGF                   | = 00                                     | MMISS   |   |                             |                                     |                                       |                              |
|--|------------------------------------|-------------------------------|------------------------|--|---|---|-----------------------------------|--|---|-------|--------------------|-----------------------|--|---|---|-----------------------------|-------------------------------------|---------------------------------------|------------------------------|
|  |                                    |                               |                        |  |   | SECURITIES AND EXCHANGE COMMISSIC<br>Washington, D.C. 20549 |                                   |  |   |       |                    |                       |  |   | OMB APPROVAL                                      |                             |                                     |                                       |                              |
|  |                                    |                               |                        |  |   | F CHANGES IN BENEFICIAL OWNERSHIP                           |                                   |  |   |       |                    |                       |  |   |   | Number                      |                                     | 3235-0287                             |                              |
| Section 16. Form 4 or Form 5<br>obligations may continue. See<br>Instruction 1(b). |                                    |                               |                        | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |   |   |                                   |  |   |       |                    |                       |  |   | Estimated average burden hours per response:      |                             |                                     |                                       | n 0.5                        |
| insidea  | 011 I(b).                          |                               |                        | FI   |   | or Se   | ction                             | 30(h) of the   | Investme  | nt Co | mpany Act o        | of 194                | 0  |   |   |                             |                                     |                                       |                              |
|  |                                    |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)  |   |                             |                                     |                                       |                              |
| Redmile Group, LLC   |                                    |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  | Director X 10% Ow<br>Officer (give title Other (s   |   |                             |                                     |                                       |                              |
| (Last) (First) (Middle)  |                                    |                               |                        |  |   | of Earliest Transaction (Month/Day/Year)                    |                                   |  |   |       |                    |                       | _  | below)  | nve uue   |                             | below)                              |                                       |                              |
| ONE LETTERMAN DRIVE, BUILDING D 07/28/2<br>SUITE D3-300                            |                                    |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| SUITE D  | 3-300                              |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| (Street) 4. If Ame   |                                    |                               |                        |  |   | endment, Date of Original Filed (Month/Day/Year)            |                                   |  |   |       |                    |                       |  | 6. Individual or Joint/Group Filing (Check Applicable Line)<br>Form filed by One Reporting Person<br>X Form filed by More than One Reporting Person |   |                             |                                     |                                       |                              |
| FRANCISCO CA 94129   |                                    |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| (Cit.)   | (0                                 |                               | (7:-)                  |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| (City)   | (5                                 | tate)                         | (Zip)                  | n Dari   |   | ive C   |                                   | rition An  | auirad  | Die   | noord o            | f                     | Domo                                     | ficially  | )   |                             |                                     |                                       |                              |
| Table I - Non-Derivative S   1. Title of Security (Instr. 3) 2. Transaction        |                                    |                               |                        |  |   |   |                                   | Deemed   | 3.  | , DIS | 4. Securiti        | ,                     |  | ,   | 5. Amount   | of                          | 6. Owi                              | nership                               | 7. Nature of                 |
| Date<br>(Month/Day/Year)   |                                    |                               |                        |  | Execution Date,<br>if any<br>(Month/Dav/Year) |   | Transaction<br>Code (Instr.<br>8) |  | Disposed Of (D) (Instr. 3, 4                              |       |                    | 8, 4 and 5)           | Securities<br>Beneficially<br>Following  | / Owned   | Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |                             | Indirect<br>Beneficial<br>Ownership |                                       |                              |
|  |                                    |                               |                        |  |   |   |                                   | intil/Day/Teal   | Code  | v     | Amount             |                       | (A) or                                   | Price   | Reported<br>Transaction                           | 1(s)                        |                                     | u. 4)                                 | (Instr. 4)                   |
|  |                                    |                               |                        |  |   |   |                                   |  | -   |       |                    | (D)                   |  | (Instr. 3 and   | 14)   | <u> </u>                    |                                     | See                                   |                              |
| Common Stock 07/28/2020  |                                    |                               |                        |  |   |   |                                   |  | С   |       | 1,596,2            | 22                    | Α  | (1)   | 1,596,222   |                             | I                                   |                                       | footnote <sup>(2)</sup>      |
|  |                                    |                               | Table II -             |  |   |   |                                   |  |   |       |                    |                       |  |   | vned  |                             |                                     |                                       |                              |
| 1. Title of  | 2.                                 | 3. Transaction                | 3A. Deemed             | (e.g.,   | րու   | S, Ca   | ·                                 | warrants   | · •   |       | isable and         |                       |  | Amount of   | 8. Price of                                       | 9. Num                      | ber of                              | 10.                                   | 11. Natu                     |
| Derivative<br>Security<br>(Instr. 3)   | Conversion<br>or Exercise          | Date<br>(Month/Day/Year)      | Execution Da<br>if any | Code (Instr  |   |   | on Derivative<br>tr. Securities   |  | Expiration Date Securities<br>(Month/Day/Year) Derivative |       |                    | urities U<br>vative S | nderlying Derivative<br>ecurity Security |   | derivati<br>Securit                               | ve<br>ies                   | Ownershi<br>Form:                   | ip of Indire<br>Beneficia             |                              |
|  | Price of<br>Derivative<br>Security |                               | (Month/Day/Y           |  |   |   |                                   | Acquired (A) or<br>Disposed of (D)<br>(Instr. 3, 4 and |   |       |                    | (Instr. 3 and 4)      |  | 4)  | (Instr. 5)  | Benefic<br>Owned<br>Followi | ng                                  | Direct (D<br>or Indire<br>(I) (Instr. | ct (Instr. 4)                |
|  |                                    |                               |                        |  |   |   |                                   | 5)   |   |       |                    |                       |  | Amount or   | int or  |                             | d<br>tion(s)                        |                                       |                              |
|  |                                    |                               |                        | Co   | de  | v   | (A)                               | (D)  | Date<br>Exercis   | able  | Expiration<br>Date | Title                 | _ <b> </b> N                             | lumber of<br>Shares   |   | (Instr. 4                   | ,                                   |                                       |                              |
| Series D<br>Redeemable   |                                    |                               |                        |  |   |   |                                   |  |   |       |                    | C                     |  |   |   |                             |                                     |                                       | E a a                        |
| Convertible<br>Preferred   | (1)                                | 07/28/2020                    |                        | ·   '  | 2   |   |                                   | 14,062,719   | (1)   |       | (1)                |                       | ock 1                                    | 1,596,222   | \$0.00  |                             | )                                   | I                                     | See<br>footnote <sup>(</sup> |
| Stock  |                                    | *                             |                        |  |   |   | <u> </u>                          |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
|  | d Address of l                     | Reporting Person <sup>*</sup> |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
|  |                                    |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| (Last)   | TERMAN                             | (First)<br>DRIVE, BUILE       | (Middle<br>DING D      | e)   |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| SUITE D  |                                    | DRIVE, DOILL                  |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| (Street)   |                                    |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| SAN FRANCISCO CA 94129   |                                    |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| (City) (State) (Zip)   |                                    |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| 1. Name an<br><u>Green J</u>   |                                    | Reporting Person <sup>*</sup> |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| (Last)   |                                    | (First)                       | (Middle                | e)   |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| ONE LET<br>SUITE D   |                                    | DRIVE, BUILE                  | DING D                 |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| (Street)<br>SAN FRANCISCO CA 94129   |                                    |                               |                        |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |
| (City)   |                                    | (State)                       | (Zip)                  |  |   |   |                                   |  |   |       |                    |                       |  |   |   |                             |                                     |                                       |                              |

Explanation of Responses:

1. The Series D Redeemable Convertible Preferred Stock converted into shares of the Issuer's common stock immediately prior to the closing of the Issuer's initial public offering on a 1-for-0.1135074 basis and had no expiration date.

2. These securities are directly owned by certain private investment vehicles managed by Redmile Group, LLC ("Redmile") and may be deemed beneficially owned by Redmile as investment manager of such private investment vehicles. The reported securities may also be deemed beneficially owned by Jeremy Green as the principal of Redmile. The Reporting Persons disclaim beneficial ownership of the reported securities except to the extent of their pecuniary interest therein, and this report shall not be deemed an admission that such Reporting Persons are the beneficial owners of the securities for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

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.