SEC	Form	4
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

I

OMB Number:	3235-0287
Estimated average burde	en
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

1. Name and Address of Reporting Person <sup>*</sup> Franchi Jean M.			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>BIODESIX INC</u> [ BDSX ]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owne				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/01/2024		Officer (give title below)	Other (specify below)			
919 WEST DIL	LON RD		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	ridual or Joint/Group Filir	ng (Check Applicable			
(Street)				X	Form filed by One Re	porting Person			
LOUISVILLE	СО	80027			Form filed by More the Person	an One Reporting			
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication						
			Check this box to indicate that a transaction was made pursuant to the affirmative defense conditions of Rule 10b5-1(c). See Instruction		instruction or written plan th	nat is intended to satisfy			
		Table I - Non-D	erivative Securities Acquired, Disposed of, or Bene	ficially (	Dwned				

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)	iction	4. Securities A Disposed Of (			5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(1150.4)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(0.9.	, puio	, oun	5, <b>W</b> all	unic	s, options,	001110111		111100)				
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. Transa Code ( 8)		5. Number Derivativ Securitie Acquired or Dispos of (D) (In 3, 4 and 5	re IS I (A) sed str.	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)	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	Title	Amount or Number of Shares		(Instr. 4)		
Restricted Stock Units	(1)	01/01/2024		Α		105,389		(2)	(2)	Common Stock	105,389	\$ <u>0</u>	145,811 <sup>(3)</sup>	D	

Explanation of Responses:

1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of the Issuer's Common Stock.

2. These RSUs will vest in full on March 31, 2024, generally subject to the Reporting Person's continued service with the Issuer, and have no expiration date. In the event the Reporting Person's continued service with the Issuer, and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Reporting Person's continued service with the Issuer and have no expiration date. In the event the Issuer and have no expiration date. In the event the Issuer and have no expiration date. In the event the Issuer and have no expiration date. In the event the Issuer and have no expiration date. In the event the Issuer and have no expiration date. In the event the Issuer and have no e

on the Board terminates other than for cause, these RSUs will vest on a prorated basis based on the number of full months of service the Reporting Person completed during the applicable vesting period. 3. Represents deferred RSUs. The shares of Common Stock underlying these RSUs will be issued to the Reporting Person following the Reporting Person's separation from service with the Issuer.

<u>/s/ Ro</u>	obin	H. Cov	wie a	as Atto	<u>orney-</u> 01/03/2024
in-Fa	ct fo	r Jean	Frar	nchi	01/03/2024

\*\* 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.