FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

	OMB Number:	3235-0287			
ı	Estimated average burden				
ı	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 Hallam Trevor			2. Issuer Name and Ticker or Trading Symbol SUTRO BIOPHARMA, INC. [ STRO ]	Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) C/O SUTRO BIOL	(First) PHARMA, INC.	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/14/2023	X	Officer (give title below)  Pres. Rsrch & Cf. Sct	Other (specify below)					
111 OYSTER POINT BLVD.  (Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
SOUTH SAN FRANCISCO	CA	94080	Rule 10b5-1(c) Transaction Indication								
(City) (State) (Zip) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	04/14/2023		M		3,750	A	\$0.00	101,664	D	
Common Stock	04/14/2023		F		1,296(1)	D	\$4.4	100,368	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. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)		Derivative		Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative	9. Number of derivative Securities Beneficially Owned Following Reported	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		Transaction(s) (Instr. 4)		
Restricted Stock Unit (RSU)	(2)	04/14/2023		M			3,750	(3)	04/16/2025	Common Stock	3,750	\$0.00	7,500	D	

### **Explanation of Responses:**

- 1. Represents the number of shares of Common Stock that have been withheld by the issuer to satisfy its income tax withholding and remittance obligations in connection with the net settlement of the RSUs and does not represent a sale by the reporting person.
- $2.\ Each\ RSU\ represents\ a\ contingent\ right\ to\ receive\ one\ (1)\ share\ of\ the\ issuer's\ Common\ Stock\ upon\ settlement.$
- $3. \ The \ RSUs \ vest \ as \ to \ 1/4 th \ of \ the \ total \ shares \ annually \ beginning \ on \ April \ 16, 2022, \ subject \ to \ continued \ service \ through \ each \ vesting \ date.$

#### Remarks:

/s/ Edward C. Albini as attorneyin-fact for Trevor Hallam 04/17/2023

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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).

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$ 

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.