FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington,      | D.C  | 20549 |  |
|------------------|------|-------|--|
| vvasiliiliqibii, | D.C. | 20343 |  |

| <b>STATEMENT</b> | <b>OF CHANGES</b> | IN BENEFICIAL | <b>OWNERSHIP</b> |
|------------------|-------------------|---------------|------------------|

|   | OMB APPROVAL             |     |  |  |  |  |  |  |  |  |
|---|--------------------------|-----|--|--|--|--|--|--|--|--|
| l | 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).

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*  Accelmed Partners II L.P. |  |  |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol NeuroPace Inc [ NPCE ] |  |             |  |                    |   |                  | ationship of<br>k all applica<br>Director<br>Officer (g | ble)  | Person<br>X                | ` '   | ner  |  |                  |         |
|---|--|--|--|---|--|-------------|--|--------------------|---|------------------|---|---|----------------------------|---|--|--|------------------|---------|
| (Last) (First) (Middle) 2875 NE 191ST STREET SUITE 500              |  |  |  |   | 3. Date of Earliest Transaction (Month/Day/Year) 04/26/2021                            |             |  |                    |   |                  |   |   | below)                     | ,   |  | below)   |                  |         |
| (Street) AVENTU   | URE F  | L<br>State)                                | 33180<br>(Zip)   |   | 4. If Am   | nendment, C | Date of  | Original F         | iled (  | Month/Da         | y/Year)   |   | 6. Ind<br>Line)            |   | ed by One  | Report   | Check Applion    |         |
|   | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |  |  |   |  |             |  |                    |   |                  |   |   |                            |   |  |  |                  |         |
| Date  |  |  | 2. Transac<br>Date<br>(Month/Da                            | Execution Date,   |  | Date,       | Transaction Disposed Of (D) Code (Instr.                       |                    | ties Acquired (A) or<br>Of (D) (Instr. 3, 4 and                                 |                  |   | 5. Amount<br>Securities<br>Beneficial<br>Owned Fo<br>Reported | Following (I)              |   | Direct Indirect B  | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |                  |         |
|   |  |  |  |   |  |             |  | Code               | v   | Amount           |   | A) or<br>D)   | Price                      | Transaction(s)<br>(Instr. 3 and 4)                  |  |  |                  | 1130.4) |
| Common Stock  |  |  |  | 04/26/2   | 5/2021   |             | С  |                    | 3,454,4   | 64,422 A \$      |   | \$0.00  | 4,042,657                  |   | D <sup>(1)</sup>   |  |                  |         |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |  |   |  |             |  |                    |   |                  |   |   |                            |   |  |  |                  |         |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                 | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year | Code  | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |             | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amou<br>Securities Underl<br>Derivative Securi<br>(Instr. 3 and 4) |                  | lerlying<br>urity                                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)           |                            | e Own<br>s Form<br>ally Direc<br>or In<br>g (I) (Ir | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                  |         |
|   |  |  |  | Code  | v  | (A)         |  | Date<br>Exercisabl |   | xpiration<br>ate | Title   | Nu  | ount or<br>mber of<br>ares |   | (Instr. 4)   | ion(s)   |                  |         |
| Series B'<br>Preferred<br>Stock                                     | \$0.00   | 04/26/2021                                 |  | С   |  | 3,454,422   |  | (2)                |   | (2)              | Comm  |   | 154,422                    | \$0.00  | 3,454,   | 422  | D <sup>(1)</sup> |         |

## **Explanation of Responses:**

- 1. Shares are held by Accelmed Partners II LP. Accelmed Partners II, LLC ("Accelmed LLC") is the general partner of Accelmed Partners II GP, L.P., which is the general partner of Accelmed Partners II LP. Uri Geiger is the managing partner of Accelmed LLC and has sole voting and dispositive power with respect to the shares held by Accelmed Partners II LP. Mr. Norton, a member of our board of directors, is a General Partner at Accelmed LLC. The address of each of Accelmed LLC, Accelmed Partners II GP, LP, Accelmed Partners II LP and Mr. Norton is Ugland House, South Church Street, PO Box 309, Grand Cayman KY1-
- 2. Each share of Preferred Stock automatically converted on a 1-for-1 basis into Common Stock upon the closing of the Issuer's initial public offering, for no additional consideration. The Preferred Stock has no expiration date

## Remarks:

/s/ Uri Geiger, Managing Partner 04/26/2021

\*\* Signature of Reporting Person

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.