SEC For	m 4																
FORM 4 UNITED				STA	TES	s se			ES AND		NGE C	OMM	SSION		OMB	APPRO	/AL
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).						•	•••••		es in Be				SHIP	Estim		er: 3 verage burden sponse:	0.5
Instruc	uon 1(b).			ΗIE					a) of the Secu Investment C			.934					
1. Name and Address of Reporting Person* HEDRICK MARC H													5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
													 0#:	or (give title			I
(Last) (First) (Middle) C/O PLUS THERAPEUTICS INC.					3. Date of Earliest Transaction (Month/Day/Year) 02/16/2021								X Oncer (give nue of the specify below) below) Chief Executive Officer				
4200 MARATHON BOULEVARD, SUITE 200																	
					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joi Line)								oint/Group Filing (Check Applicable			
(Street) AUSTIN													X Form filed by One Reporting Person Form filed by More than One Reporting				
(City) (State) (Zip)													Person				
		Tab	ole I - Non	-Deriv	vativ	e Se	curities	s Ac	quired, D	isposed c	of, or Be	neficial	ly Owned	l			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ear) i	2A. Deemed Execution Date if any (Month/Day/Yea		Code (Ins	on Dispose			5. Amou Securitie Beneficia Owned F	s Form Ily (D) c ollowing (I) (II		: Direct c r Indirect E	7. Nature of Indirect Beneficial Ownership
									Code V	Amount	(A) o (D)	r Price	Price Reported Transaction (Instr. 3 and)		Instr. 4)
		-							uired, Dis s, options				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	bate,	I. Fransaction Code (Instr. 3)		5. Number		6. Date Exer Expiration D (Month/Day/	cisable and ate	able and 7. Title and Am of Securities		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy J	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$3.64	02/16/2021			A		88,314		(1)	02/16/2031	Common Stock	88,314	\$0.00	88,31	4	D	

Explanation of Responses:

1. The options vest over four years in equal 1/48th increments on each monthly anniversary of the issuance.

Remarks:

<u>/s/ Andrew Sims, as attorney-</u> <u>in-fact</u> <u>02/</u>

02/18/2021

** 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.