FORM 4

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

Washington, D.C. 20549

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OMB APPROVAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

- 1		
	OMB Number:	3235-028
	Estimated average but	urden
	hours per response.	0.4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). S	ee Instruction 1	0.																		
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol PLUS THERAPEUTICS, INC. [ PSTV ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Sims Andrew John Hugh MacIntyre				[1517]									Direct Office bolow	ctor er (give title		10% Ov Other (s				
(Last) (First) (Middle) C/O PLUS THERAPEUTICS INC.				3. Date of Earliest Transaction (Month/Day/Year) 09/10/2024									below) below) Chief Financial Officer							
4200 MARATHON BOULEVARD, SUITE 200																				
(Street) AUSTIN TX 78756 (City) (State) (Zip)												Lin	Individual or Joint/Group Filing (Check Applicable Line)      Form filed by One Reporting Person     Form filed by More than One Reporting Person							
		Table	I - Non-	Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or l	Bene	eficia	ally Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution (Execution (		cution Date,		Transaction Disposed (Code (Instr. 5)		ies Acquired (A Of (D) (Instr. 3,			nd Securi Benefi	icially d Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	) or )	Price	Transa	ction(s) and 4)			(mour 4)	
Common Stock 09/10/2					/2024			P		4,098	1	A	\$1.2	27	9,815		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)	Derivative Conversion Date Security or Exercise (Month/Day/Year) Execution Date,				4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D' (Instr and §	rities lired r osed )	6. Date Expirati (Month/	on Da			; j	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nun of	ount nber ires						

**Explanation of Responses:** 

/s/ Andrew Sims

09/11/2024

\*\* Signature of Reporting Person Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).