FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Maalainastan	D C	20540	
Washington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
houre per reenonee	. 05									

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

Name and Address of Reporting Person*     Smith Scott Andrew					2. Issuer Name and Ticker or Trading Symbol BioAtla, Inc. [ BCAB ]							(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner						
(Last)	•	•	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/14/2023								Officer below)	(give title		Other (specification)	pecify	
C/O BIOATLA, INC. 11085 TORREYANA ROAD					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN DII	EGO C	A	92121										X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(S	(State) (Zip)					Rule 10b5-1(c) Transaction Indication												
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									d to					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		Code (Ins	Transaction Disposed Of (D) (Instr. 5)			Benefici Owned F	es Forn ially (D) o Following (I) (Ir		Direct Control of the	7. Nature of Indirect Beneficial Ownership					
					Code V Amount (A) or P			r Price	Transac	ransaction(s) nstr. 3 and 4)			Instr. 4)						
	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	Date Execution Date, (Month/Day/Year) if any			ransaction of Eode (Instr. Derivative (			6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Amount of Securities Underlying Derivative S (Instr. 3 and			f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	٧	(A)	(D)	Date Exercisable		iration e	Title	Amount or Number of Shares						
Stock Option (Right to Buy)	\$3.55	06/14/2023			A		50,000		(1)	06/1	14/2033	Common Stock	50,000	\$0.00	50,000	)	D		
Stock Option (Right to Buy)	\$3.55	06/14/2023			A		5,895		(2)	06/1	14/2033	Common Stock	5,895	\$0.00	5,895		D		

## **Explanation of Responses:**

1. 100% of the total number of shares subject to the option shall vest and become exercisable on the earlier of (a) June 14, 2024 or (b) the day before the next annual meeting of stockholders, subject to the reporting person continuing to provide services through the vesting date.

2. Fully vested and exercisable.

## Remarks:

/s/ Christian Vasquez, as Attorney-in-Fact for Scott A.

06/15/2023

Smith

\*\* 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.