

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF
SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934
or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person * <u>Aghazadeh Behzad</u> (Last) (First) (Middle) <u>C/O AVORO CAPITAL ADVISORS LLC</u> <u>110 GREENE STREET, SUITE 800</u> (Street) <u>NEW YORK</u> <u>NY</u> <u>10012</u> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>07/23/2026</u>	3. Issuer Name and Ticker or Trading Symbol <u>Scribe Therapeutics, Inc.</u> [<u>SCTX</u>] Foreign Trading Symbol	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) ☒ Director 10% Owner Officer (give title below) ☒ Other (specify below) <u>See Remarks</u>	5. If Amendment, Date of Original Filed (Month/Day/Year)
		6. 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-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
<u>Common Stock, par value \$0.0001 per share</u>	<u>697,650</u>	<u>I</u>	<u>See footnotes⁽¹⁾⁽²⁾</u>

Table II - Derivative Securities Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person * <u>Aghazadeh Behzad</u> (Last) (First) (Middle) <u>C/O AVORO CAPITAL ADVISORS LLC</u> <u>110 GREENE STREET, SUITE 800</u> (Street) <u>NEW YORK</u> <u>NY</u> <u>10012</u> (City) (State) (Zip)
1. Name and Address of Reporting Person * <u>Avoro Capital Advisors LLC</u> (Last) (First) (Middle) <u>110 GREENE STREET</u> <u>SUITE 800</u> (Street) <u>NEW YORK</u> <u>NY</u> <u>10012</u> (City) (State) (Zip)

1. Name and Address of Reporting Person *		
<u>Avoro Ventures LLC</u>		
(Last)	(First)	(Middle)
<u>110 GREEN STREET, SUITE 800</u>		
(Street)		
<u>NEW YORK</u>	<u>NY</u>	<u>10012</u>
(City)		
(State)	(Zip)	

Explanation of Responses:

1. The securities reported herein are held on behalf of accounts managed by Avoro Capital Advisors LLC, a Delaware limited liability company ("Avoro Capital Advisors"). Behzad Aghazadeh ("Dr. Aghazadeh") serves as the portfolio manager and controlling person of Avoro Capital Advisors and Avoro Ventures LLC, a Delaware limited liability company ("Avoro Ventures", and together with Avoro Capital Advisors and Dr. Aghazadeh, the "Reporting Persons").
2. The filing of this statement shall not be deemed an admission that any Reporting Person is the beneficial owner of the securities reported herein for purposes of Section 16 of the Securities Act of 1934, as amended, or otherwise. Each of the Reporting Persons expressly disclaims beneficial ownership of the securities reported herein except to the extent of its or his pecuniary interest therein.

Remarks:

Avoro Capital Advisors and Avoro Ventures may be deemed directors by deputization of the Issuer by virtue of the fact that Dr. Aghazadeh currently serves on the board of directors of the Issuer.

<u>Avoro Capital Advisors</u> <u>LLC, by: /s/ Scott Epstein,</u> <u>its Chief Operating Officer</u>	<u>07/23/2026</u>
<u>& Chief Compliance</u> <u>Officer</u>	
<u>Avoro Ventures LLC, by:</u> <u>/s/ Scott Epstein, its Chief</u> <u>Operating Officer & Chief</u> <u>Compliance Officer</u>	<u>07/23/2026</u>
<u>/s/ Behzad Aghazadeh</u>	<u>07/23/2026</u>
** 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 5 (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.