FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden

0.5

hours per response:

X to

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Novo Holdings A/S						2. Issuer Name and Ticker or Trading Symbol SPRUCE BIOSCIENCES, INC. [SPRB]										o of Reportir dicable) tor	ng Pe	. ,	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 03/21/2024										Office	er (give title v)		Other (below)	specify
TUBORG HAVNEVEJ 19					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														X	Form	filed by On	e Rep	oorting Pers	on
HELLER	RUP G7	2			Form filed by Mor Person									re tha	e than One Reporting				
(City)	(City) (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.													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y					ear) E	fany	on Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			nd 5) Secu Bend Own		icially d Following	For (D) (Indi	m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price		Transa	Reported Transaction(s) (Instr. 3 and 4)		tr. 4)	(Instr. 4)
COMMON STOCK 03/21/202					.4				S		465,021	D	\$0.754	.7547 ⁽¹⁾		2,550,000		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) 2. Conversion Option or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year)			3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Dat (Month/Day/Ye		Date	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)			vative irity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	or Number of Shares						

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$0.71 to \$0.7785, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

Remarks:

/s/ Barbara Fiorini Due,

General Counsel, Finance &

03/25/2024

Operations

** 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.