FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasinigton,	D.C. 20049	

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

Ownership Form:

Direct (D)

or Indirect (I) (Instr. 4) of Indirect

Beneficial

Ownership

(Instr. 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 10b5-1(x). See Instruction 1

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*				2. Issuer Name and Ticker or Trading Symbol Scilex Holding Co SCLX							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
SHAH	<u>JAISI</u>	<u>M</u>				=	<u>enex froiding</u>	<u>5 CO</u>	L	LA J			✓ Dired	ctor		10% O	wner
(Last) (First) (Middle) C/O SCILEX HOLDING COMPANY 960 SAN ANTONIO ROAD				3. Date of Earliest Transaction (Month/Day/Year) $10/29/2024$							Officer (give title Other (specify below) See Remarks						
(Street) PALO ALTO CA 94303)3	4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)		(Stat	e)	(Zip)													
			Tal	ole I -	Non-Deriva	tive	e Securities A	cqui	ed, l	Disposed	of, or	Beneficia	lly Owr	ned			
Date		2. Transaction Date (Month/Day/Yea	Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)		
Common Stock			10/29/2024	1		P ⁽¹⁾		32,000	A	\$0.9897(2	109,333		D				
Common Stock											155,882		I		ee ootnote ⁽³⁾		
				Table			Securities Ac							d			
1. Title of	2.		3. Transaction	3A	. Deemed	4.	5. Numb	er 6.	Date E	xercisable and	7. Ti	tle and	8. Price of	9. Numbe	er of 10.		11. Nature

Explanation of Responses:

Conversion

(Month/Day/Year)

or Exercise Price of

Derivative

Security

1. Open market purchase by the reporting person of 32,000 shares of common stock, par value \$0.0001 per share (the "Common Stock"). The number of shares of Common Stock reported represents an aggregate number of shares purchased in multiple open market transactions at a price of \$0.9897.

Exercisable

of Derivative

Securities

Acquired (A) or Disposed of (D)

(Instr. 3, 4

and 5)

(A) (D)

Code (Instr.

8)

Code

Expiration Date (Month/Day/Year)

Expiration

- 2. Reflects the weighted average price of the shares of Common Stock purchased on the open market in multiple transactions on October 29, 2024 at a price of \$0.9897. The amount reflected has been rounded to four decimal points. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the U.S. Securities and Exchange Commission, upon request, full information regarding the number of such shares of Common Stock purchased at each separate price within such range.
- 3. Shares are held in a family trust of which the Reporting Person is a co-trustee with his spouse

Remarks:

Derivative

Security

(Instr. 3

Chief Executive Officer and President

<u>/s/ Jaisim Shah</u> <u>10/29/2024</u>

Derivative

Security

(Instr. 5)

derivative

Securities

Following Reported Transaction(s)

(Instr. 4)

Owned

Beneficially

** Signature of Reporting Person Date

Amount of

Underlying

Security (Instr. 3 and 4)

Amount or Number

Shares

Derivative

Title

Securities

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

Execution Date,

(Month/Day/Year)

if any

- * 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.