Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
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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* Malin Life Sciences Holdings Ltd				2. Issuer Name and Ticker or Trading Symbol Poseida Therapeutics, Inc. [PSTX]									eck all appl Direct	tor	ng Pers X	10% Ov	vner		
(Last) (First) (Middle) THE LENNOX BUILDING 50 RICHMOND STREET SOUTH				3. Date of Earliest Transaction (Month/Day/Year) 12/06/2021								Officer (give title X Other (specify below) Common director with Issuer							
(Street) DUBLIN IRELAN (City)	1 1)		002 FK0)2	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execution Date,		Date,	Transaction Disposed Code (Instr. 5)		ies Acquired (A Of (D) (Instr. 3,			Benefic	ies cially Following	Form:	Direct of Indirect Itr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
										v	Amount (A)		or	Price	Transac (Instr. 3	ction(s)			
COMMON STOCK 12/06/				/2021				P		1,828	A		\$6.9	9,685,673]	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)	ative Conversion Date Execution Date, Tr ity or Exercise (Month/Day/Year) if any Co		Transa	5. Number of Operivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str.	Derivative Security Security Security	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.		Beneficial Ownership t (Instr. 4)				
							Date Exercisa	te Expiration of		Num									

Explanation of Responses:

/s/ Pat Jennings, Chief Financial Officer

12/06/2021

** 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.