FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* Mamuszka Hannah					2. Issuer Name and Ticker or Trading Symbol Bionano Genomics, Inc. [BNGO] 3. Date of Earliest Transaction (Month/Day/Year) 06/18/2024							Relationship of Reporting Perso (Check all applicable) Director Officer (give title below)			uer vner specify	
(Last) (First) (Middle) C/O BIONANO GENOMICS, INC.					4. If Amendment, Date of Original Filed (Month/Day/Year)							below) below) 6. Individual or Joint/Group Filing (Check Applicable				
9540 TOWNE CENTRE DRIVE, SUITE 100						, , , , , , , , , , , , , , , , , , , ,							ine) Form filed by One Reporting Person			
(Street) SAN DIEGO		CA 92121										Form filed by More than One Reporting Person				
,					Rule 10b5-1(c) Transaction Indication											
(City) (State)		tate)	(Zip)		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)			Da	. Transactio ate Month/Day/\	ear) i	2A. Deemed Execution Date, f any Month/Day/Year		Transaction Dispose Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amour Securitie Beneficia Owned F Reported	s F ally (ollowing (orm: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)		(111511.4)	
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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Ye	Code	Transaction Code (Instr.		ve es ed ed nstr.	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$0.7752	06/18/2024		A		30,000		(1)	06/18/2034	Common Stock	30,000	\$0	30,000	D		

Explanation of Responses:

1. The shares will vest in equal monthly installments over the 12 months following the date of grant, provided that the shares will, in any case, be fully vested on the date of the Company's next annual stockholder meeting, subject to the option holder's Continuous Service (as defined in the Company's 2018 equity incentive plan) through each such vesting date and will vest in full upon a Change of Control (as defined in the Company's 2018 equity incentive plan).

Remarks:

/s/ R. Erik Holmlin, Attorney-in-Fact

06/20/2024

** 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.