FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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

Name and Address of Reporting Person*     Johnson Ray O						2. Issuer Name <b>and</b> Ticker or Trading Symbol Rigetti Computing, Inc. [ RGTI ]									lationship ck all app Direc	licable)	ng Per	rson(s) to Is		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/18/2024									Office	er (give title		Other (s below)	specify		
C/O RIGETTI COMPUTING, INC. 775 HEINZ AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person					
(Street) BERKEI	Street) BERKELEY CA 94710				Dula 10h5 1(a) Transaction is disasting										Form filed by More than One Reporting Person					
(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. Transact Date (Month/Day						Exec if any	2A. Deemed Execution Date, f any (Month/Day/Year)					es Acquired (A) o Of (D) (Instr. 3, 4				ties cially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (D	) or )	Price		ed ection(s) 3 and 4)			(Instr. 4)	
Common Stock 06/18/2					2024				A		142,857(	1) .	A	\$ <mark>0</mark>	346,901			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)	vative Conversion Date Execution Date or Exercise (Month/Day/Year) if any			ion Date,	Code (Instr.		of Expi Derivative (Mor Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expirat (Month	Date Exercisable and expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V (A)		(D)	Date Exercisa		Expiration Date	of   Title   Shares		es								

## **Explanation of Responses:**

1. Represents an annual grant of restricted stock units ("RSUs") for service as a director of the Issuer. The shares underlying the RSUs will vest in full on the earlier of (i) the date of the Issuer's 2025 annual meeting of the stockholders (or the date immediately prior to such annual meeting if the Reporting Person's service as a director ends at such annual meeting) or (ii) on June 18, 2025, each subject to the Reporting Person's continuous service with the Issuer as of the applicable vesting date.

/s/ Rick Danis, Attorney-in-

06/20/2024

**Fact** 

\*\* 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.