FORM 4

## **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									
hours per response	e: 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* <u>Tripeny R Tony</u>				2. Issuer Name and Ticker or Trading Symbol Origin Materials, Inc. [ ORGN ]										ck all app	licable)	ng Pe	rson(s) to Is		
(Last)	(Fir	,	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 03/31/2024										Office below	er (give title /)		Other (s below)	specify
C/O ORIGIN MATERIALS, INC. 930 RIVERSIDE PARKWAY, SUITE 10					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person						
(Street) WEST SACRAMENTO CA 95605			Dul	Dula 40h 5 4(a) Tanna adian la disadian									Form filed by More than One Reporting Person						
(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				Execution			Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			3, 4 and Securi Benefi Owned		ies cially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A)	or P	rice	Report Transa (Instr. 3	saction(s) c. 3 and 4)			(Instr. 4)
Common Stock 03/31/2					2024				A		32,589(1)	1) <b>A</b>		<b>\$0</b>	144,274			D	
Common Stock														73	73,000			By Trust <sup>(2)</sup>	
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)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any			Transaction Code (Instr. 8) S A (#		of Deriv	r osed ) r. 3, 4	Expiration Da (Month/Day/Y		ite ear)	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		tr.	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficiall 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 Exercisable		Expiration Date	Title	of						

## **Explanation of Responses:**

1. These shares represent the shares of Common Stock underlying restricted stock units ("RSUs") that the Reporting Person elected to receive in lieu of cash compensation under the Issuer's Amended and Restated Non-Employee Director Compensation Policy, as amended, for the quarter ended March 31, 2024. The number of RSUs received in lieu of cash was calculated based on the closing price per share of Common Stock on March 28, 2024. Each RSU represents the contingent right to receive one share of the Issuer's Common Stock. The RSUs are fully vested upon the date of grant.

2. Shares are held directly by R. Tony Tripeny, Trustee of the Revocable Trust of R. Tony Tripeny dated December 14, 2022.

/s/ Ron A. Metzger, Attorneyin-Fact

\*\* Signature of Reporting Person Date

04/02/2024

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.