

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 * | | | | 2. Is | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|--|---|-------------------|---|------------|--|---|------------------------------|--|---|--------------------|---|--|---|---|----------------------------------|-------------------------|--|
| Forte Nan Kirsten | | | | Mo | Movano Inc. [MOVE] | | | | | | | | ,, | 100 | / 0 | | |
| (Last) (First) (Middle) | | | | 3. Г | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | X_ Director 10% Owner Officer (give title below) Other (specify below) | | | | | |
| C/O MOVANO, INC., 6800 KOLL CENTER PARKWAY | | | | | 1/27/2023 | | | | | | | | | | | | |
| | (Stre | et) | | 4. It | f An | nendmer | nt, Date C | rigin | al Fil | ed (MM/I | DD/YYYY) | 6. Individual o | or Joint/G | roup Filing | (Check Appl | icable Line) | |
| PLEASANTON, CA 94566 (City) (State) (Zip) | | | | | | | | | | | | | X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | , | Table I - I | Non-Deri | ivati | ve Secu | rities Ac | quire | ed, Di | isposed (| of, or Be | neficially Owne | ed | | | | |
| 1. Title of Security (Instr. 3) | | | | | ate 2A. Deemed Execution Date, if any | | 3. Trans. Code (Instr. 8) | | 4. Securities Acquor Disposed of (D (Instr. 3, 4 and 5) | | D) ` ´ | 5. Amount of Securit Following Reported (Instr. 3 and 4) | ities Beneficially Owned I Transaction(s) | | Ownership of Form: Bo Direct (D) | Beneficial Ownership | |
| | | | | | | | Code | V | Amo | unt (A) | | | | | or Indirect (I) (Instr. 4) | (Instr. 4) | |
| Common Stock 1/27/202 | | | /27/2023 | | | P | | 714 | 2 A | <u>(1)</u> | 7142 | | | D | | | |
| | Tab | le II - Deri | vative Se | curities I | Bene | eficially | Owned (| [e.g. ,] | puts, | calls, w | arrants, | options, conver | tible secu | ırities) | | | |
| 1. Title of Derivate Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Trans. Date | 3A. Deemed Execution Date, if any | Code | | 5. Number of Derivative Securitie Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date | | Securities | nd Amount of S Underlying e Security nd 4) | Inderlying Derivative Security Security | | Ownership Form of | Beneficial | | |
| | | | | Code | V | (A) | (D) | Date Exerc | eisable | Expiration Date | Title | Amount or Number of Shares | | Following Reported Transaction(s) (Instr. 4) | or Indirect | | |
| Warrant to Purchase Common Stock | \$1.57 | 1/27/2023 | | P | | 3571 | | 1/31/ | 2023 | 1/31/2028 | Commo Stock | on 3571 | <u>(1)</u> | 3571 | D | | |

Explanation of Responses:

(1) Reporting Person purchased 7,142 shares of Common Stock and accompanying warrants to purchase 3,571 shares of Common Stock in the Issuer's public offering at a combined purchase price of \$1.40 per share and accompanying warrant.

Reporting Owners

| reporting o where | | | | | | | |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Relationships | | | | | | |
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Forte Nan Kirsten | | | | | | | |
| C/O MOVANO, INC. | X | | | | | | |
| 6800 KOLL CENTER PARKWAY | Λ | | | | | | |
| PLEASANTON, CA 94566 | | | | | | | |

Signatures

/s/ Nan K. Forte by Mark R. Busch, attorney-in-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 control number.