FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |  |
|-------------|------|-------|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| wasnington, | D.C. | 20549 |
|-------------|------|-------|
|             |      |       |

| 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

|   |               |                   |                 |                           | 01 30          | ecuon a   | 0 (11) 0             | ii iiile     | iiivesti                         | neni C                | ompany Act c                       | л 194U   |  |   |   |  |   |                            |  |
|---|---------------|-------------------|-----------------|---------------------------|----------------|---|----------------------|--------------|----------------------------------|-----------------------|------------------------------------|--|--|---|---|--|---|----------------------------|--|
|   | nd Address of | Reporting Person* |                 |                           |                |   |                      |              |                                  |                       | g Symbol<br>RGN ]                  |  |  |   |   | o of Reportir<br>llicable)<br>tor  | ng Per  | rson(s) to Is              |  |
| (Last)  | (Fir          | rst) (M           | Middle          | e)                        |                | 3. Date of Earliest Transaction (Month/Day/Year) 09/01/2023                                   |                      |              |                                  |                       |                                    |  | Office   | er (give title<br>v)                                    |   | Other (sbelow)   | specify   |                            |  |
| C/O ORIGIN MATERIALS, INC.<br>930 RIVERSIDE PARKWAY, SUITE 10   |               |                   |                 |                           | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                      |                      |              |                                  |                       |                                    |  | 6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person |   |   |  |   |                            |  |
| (Street) WEST   | C             | Δ 9               | 05605           |                           |                |   |                      |              |                                  |                       |                                    |  |  |   |   | filed by Mo  |   | Ü                          |  |
| SACRA   | MENTO C       | .1 3              | 5000            | •                         | Ru             | le 10   | )b5-                 | <b>1(c</b> ) | ) Tra                            | nsa                   | ction Ind                          | icatio   | on   |   |   |  |   |                            |  |
| (City)  | (Sta          | ate) (Z           | Zip)            |                           |                | Check tl<br>satisfy tl  | his box<br>he affirr | to ind       | licate the defense               | at a trai<br>se condi | nsaction was m<br>itions of Rule 1 | nade pur<br>0b5-1(c)   | suant to a o   | contra  | act, instr<br>10.                                   | uction or writt  | en pla  | n that is inte             | nded to  |
|   |               | Table             | I - N           | lon-Deriva                | tive           | Secui   | rities               | Ac           | quire                            | d, Di                 | sposed of                          | f, or B  | enefici  | ally  | Own   | ed   |   |                            |  |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y   |               |                   | Execution Date, |                           |                | 3.<br>Transaction<br>Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 |                      |              |                                  |                       |                                    | ties<br>cially<br>I Following                                  | Forn<br>(D) o  | Ownership<br>orm: Direct<br>) or Indirect<br>(Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |   |                            |  |
|   |               |                   |                 |                           |                |   |                      |              | Code                             | v                     | Amount                             | (A) or<br>(D)  | Price  | Trans   |   | action(s)<br>3 and 4)  |   |                            | (Instr. 4)   |
| Common  | Stock         |                   |                 | 09/01/20                  | 23             |   |                      |              | P                                |                       | 73,000                             | A  | \$1.370  | 73,000 I  |   |  |   | By<br>Trust <sup>(2)</sup> |  |
| Common  | Stock         |                   |                 |                           |                |   |                      |              |                                  |                       |                                    |  |  | 74,615 D  |   |  |   |                            |  |
|   |               | Tal               | ble II          | l - Derivati<br>(e.g., pu |                |   |                      |              |                                  |                       | posed of,<br>convertib             |  |  |   | Owne  | d  |   |                            |  |
| 1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Y/ |               |                   | Exec<br>if an   |                           |                | action<br>(Instr.   |                      |              | Expiration Date (Month/Day/Year) |                       |                                    | 7. Title<br>Amou<br>Secur<br>Under<br>Deriva<br>Secur<br>3 and | nt of<br>ities<br>lying<br>ative<br>ity (Instr.<br>4)  | Der<br>Sec  | Price of<br>erivative<br>ecurity<br>estr. 5)        | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owner<br>Form:<br>Direct<br>or Indi<br>(I) (Ins | Ownership                  | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |               |                   |                 |                           | Code           | v   | (A)                  | (D)          | Date<br>Exer                     | cisable               | Expiration Date                    | Title  | Amount<br>or<br>Number<br>of<br>Shares   |   |   |  |   |                            |  |

## **Explanation of Responses:**

- 1. Price reported is a weighted-average purchase price. The shares were purchased at prices ranging from \$1.355 to \$1.3799. The Reporting Person will provide upon request to the SEC, the Issuer or security holder of the Issuer, full information regarding the number of shares purchased at each separate price.
- 2. Shares are held directly by R. Tony Tripeny, Trustee of the Revocable Trust of R. Tony Tripeny dated December 14, 2022.

## Remarks:

R. Tony Tripeny, by /s/ Ron A. 09/06/2023 Metzger, 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 Number.