FORM 4

## **UNITED STATES SECU**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

JRITIES	AND	EXCHANGE	COMMI	SSION

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

	Check this box if no longer subject to
1	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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative
defense conditions of Rule 10b5-

1(c). S	ee Instruction 1	0.															
Name and Address of Reporting Person* <u>Cappello Joseph</u>				2. Issuer Name and Ticker or Trading Symbol GENELUX Corp GNLX						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
				1 OLL	GENELOX Corp [ GNEX ]							Direc	tor	10% O		wner	
												_	▼ Office below	er (give title v)		Other (below)	specify
(Last)	Filly CC	rst) (1 ORPORATION	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/16/2024							VP, Pharmaceutical Development					
2625 10	WNSGAII	E ROAD, SUITE	230														
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)					Lin	6. Individual or Joint/Group Filing (Check Applicable Line)								
WESTL	$C_{\lambda}$	Δ 9	1361										√ Form	filed by On	e Repor	rting Pers	on
VILLAC	E												Form Perso	filed by Mo on	re than	One Rep	orting
(City)	(St	ate) (Ž	Zip)														
		Table	I - Noi	n-Deriva	tive S	ecur	ities Acq	uired,	Disp	osed of	, or Ber	neficia	ally Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Date,		3. 4. Securities Acquired Disposed Of (D) (Instr. 5)			d Securit Benefit Owned	5. Amount of Securities Beneficially Owned Following		Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 12/1			12/16/2	/2024			S <sup>(1)</sup>		6,300	D	\$2.3	4 14	4,653	D			
		Tal					ies Acqui varrants,							d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transac Code (Ir 8)		of	6. Date   Expirati (Month/	on Dat		7. Title ar Amount of Securitie Underlyin Derivativ Security 3 and 4)	of s ng e	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y O Fo O (I)	0. wnership orm: irect (D) r Indirect ) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

1. Represents shares sold by the Reporting Person to cover estimated taxes to be paid by the Reporting Person in connection with the vesting of restricted stock units.

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and 5)

(A) (D) Date

/s/ Sean Ryder, Attorney-in-

Amount or Number

**Fact** 

Title

Expiration

12/18/2024

\*\* Signature of Reporting Person

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.