FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL							
OMB Number:	3235-0104						
Estimated average burden							
hours per response:	0.5						

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

				00000011 00(11	., 01 010 1111	estinent Company Act of 1940					
Name and Address of Reporting Person*     Egholm Michael			2. Date of Event Requir Statement (Month/Day/ 04/04/2022	t (Month/Day/Year) STANDARD BIOTOOLS INC [ LAB ]							
(Last) C/O STANDARD 2 TOWER PLACE (Street)		(Middle)				nship of Reporting Person(s) to Issu l applicable) Director Officer (give title below) President & CEC	10% Owner Other (specify		6. Individual or Joint/Groo	f Original Filed (Month/Day/Year)  up Filing (Check Applicable Line)  one Reporting Person	
SOUTH SAN FRANCISCO	CA	94080				Trosacii de est			Form filed by N	Nore than One Reporting Person	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount Owned (Ins	str. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock						5,000	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)			ate	Security (Instr. 4) Convers		4. Conversi or Exerci Price of	se or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
		Date Exercisable	Expiration Date	Amount or Deriva		Derivative Security					

**Explanation of Responses:** 

Remarks:

/s/ Michael Egholm by Nicholas Khadder, Attorney-in-Fact

04/06/2022

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 5 (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).

## POWER OF ATTORNEY

The undersigned, as a Section 16 reporting person of Standard BioTools Inc. (f/k/a Fluidigm Corporation) (the "Company"), hereby constitutes as

- 1. complete and execute Forms ID, 3,4 and 5 and other forms and all amendments thereto as such attorney-in-fact shall in his or her discret:
- 2. do all acts necessary in order to file such forms with the Securities and Exchange Commission, any securities exchange or national assoc:
  The undersigned hereby ratifies and confirms all that said attorney-in-fact and agents shall do or cause to be done by virtue hereof. The undersigned of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms ID, 3, 4 and 5 with responsible to the undersigned has caused this Power of Attorney to be executed as of this 18th day of March, 2022.

Signature: /s/ Michael Egholm Michael Egholm