FORM 4

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

[] 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.

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL

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

| 1. Name and Address of Reporting Person* SHUNK LAURA F | | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner | | |
|--|--|-----------|---|---|--|---------------------------------------|---|------------|---|--|--|---|--------------|--|
| (Last) (First) (Middle) | | | | | | SCI ENGINEERED MATERIALS, INC. [SCIA] | | | | | Officer (give | Other (sp | ecify | |
| 2839 CHARTER STREET (Street) | | 3 | 3. Date of E | arliest Transa 06 /0 | action (04/2025 | | Day/Year) | | mendment n/Day/Yea | , Date Original Filed r) | title below) be | elow) | | |
| | | | | | | | | | | | 6. Individual or Joint/Group Applicable Line) | Filing (Chec | ek | |
| COLUMBUS, OH 43228 (City) (State) (Z | p) | | | | | | | | | | X Form filed by One Report Form filed by More that | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | |
| (Instr. 3) (Month/Day/Year) Execution any | | Execution | Date, if | n Code 4. Securities Ad Disposed of (D (Instr. 3, 4 and | | | (D) | A) or | 5. Amount of Securities Benefic Reported Transaction(s) (Instr. 3 and 4) | ially Owned Following | Form: Direct (D) or Indirect | | | |
| | | | | Code | V | V A | mount | (A) or (D) | Price | | | (I) (Instr. 4) | | |
| Common stock, without par value | 06/04/2025 | | | P | | | 100 | A | \$4.45 | | 520,273 | I | By Spouse | |
| 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) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. JA. Deemed Execution Date, if any (Instr. 8) | 5. Number of Deriva Securities Acquired Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | Beneficia | er of Derivative Securities ally Owned Following Reported ion(s) (Instr. 4) | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| Code V | (A) | | Date Exercisable | Expiration Date | Title | Amoun Numbe Shares | | | | | | | | |

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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMBcontrol number.

| | | | * *** | ~~~ |
|---------|-------|----------|-------|-----|
| /s/ Ger | ald S | . Blaski | e VP- | CFO |

06/06/2025

**Signature of Reporting Person

Date