\Box

(City)

(State)

(Zip)

FORM 4

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 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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 [*] South Cone Investments Limited Partnership					2. Issuer Name and Ticker or Trading Symbol <u>Rani Therapeutics Holdings, Inc.</u> [RANI] 3. Date of Earliest Transaction (Month/Day/Year)								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (give title Other (specify below) below)							
(Last) (First) (Middle) AVENIDA PRESIDENTE RIESCO 5711					11/28/2022															
OFICINA 1603, LAS CONDES					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SANTIAGO F3 7550000													Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City) (State) (Zip)																				
		Table	I - Non-Deriva	ative	Se	curit	ies A	cquire	ed, D	isposed o	of, or E	Benefi	icially	y Own	ed					
			2. Transactic Date (Month/Day/	Year)	ar) (Month/Da		Date,	3. Transaction Code (Instr. 8)		4. Securities Acqu Disposed Of (D) (II		;quired (A) or)) (Instr. 3, 4 and 5)		5. Amo Securit Benefic Owned Report	ties cially Following	Forn (D) c	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) or (D)	Price		Transa	ction(s) 3 and 4)			(
Class A Common Stock			11/28/20	122			Р		3,720	А	\$7.95	536(1)	6,566,272		Ι		Shares indirectly held through South Lake One LLC ⁽²⁾			
		Ta	ble II - Derivat							sposed of, , converti				Ownee	d					
1. Title of Derivative Security (Instr. 3)	f 2. 3. Transaction 3A. Deemed Execution Date		4. Transaction Code (Instr. 8)		5. Numbe		6. Date Exercisable and Expiration Date (Month/Day/Year) I			_		8. I De Se (In	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownershij Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership t (Instr. 4)			
				Code	v	(,	A) (D)	Date Exe	e rcisab	Expiration le Date		Amour or Numbe of Shares	er							
		Reporting Person	ited Partnersh	in																
(Last)		(First)	(Middle)	<u>mp</u>	_															
		S CONDES	0,11																	
(Street) SANTIA	\GO	F3	7550000		_															
(City)		(State)	(Zip)																	
	nd Address of Lake One	Reporting Person [*]																		
	DA PRESID	(First) DENTE RIESCO S CONDES	(Middle) 5711																	
(Street) SANTIA	\GO	F3	7550000																	

Explanation of Responses:

1. The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$7.645 to \$8.00 per share, inclusive. The reporting persons undertake to provide Rani Therapeutics Holdings, Inc., a Delaware corporation (the "Issuer"), any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote (1) to this Form 4.

2. South Cone Investments Limited Partnership directly owns 100% of the issued and outstanding membership interest of South Lake One LLC.

 /s/ Isidoro Quiroga Cortes and
 /s/ Luis Felipe Correa
 11/30/2022

 Gonzalez, Managers of South
 11/30/2022

 Lake One LLC
 /s/ Isidoro Quiroga Cortes and
 /s/ Isidoro Quiroga Cortes and

 /s/ Luis Felipe Correa
 Gonzalez, Managers of South
 11/30/2022

 Gonzalez, Managers of South
 11/30/2022
 11/30/2022

 General Partner of South Cone
 11/30/2022
 11/30/2022

 General Partner of South Cone
 11/30/2022
 11/30/2022

 Yeatnership
 ** 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.