FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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| wasnington, D.C. 20549 | OMB APP | ROVAL |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235 |
| | Father stand account to | |

| OMB Number: | 3235-028 |
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| Estimated average burd | en |
| hours per response: | 0. |

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 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Williams R Sanders | | | | | <u>Ter</u> | 2. Issuer Name and Ticker or Trading Symbol Tenaya Therapeutics, Inc. [TNYA] 3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023 | | | | | | | | neck all apport | licable) tor er (give title | ng Per | son(s) to Iss 10% Ov Other (s below) | ner |
|---|--------|------------|---------|---|---------------------------------------|--|----------|------------------|--|--|--|-----------------|--|--|-----------------------------------|--|--|---|
| (Last) (First) (Middle) | | | | | 06/0 | 06/09/2023 | | | | | | | | | v) | | below) | |
| C/O TENAYA THERAPEUTICS, INC. 171 OYSTER POINT BLVD., 5TH FLR | | | | | | | endment, | Date | of Original Fi | led (| (Month/Da | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| 171 OYS | | | | | | | | | | X Form filed by One Reporting Person | | | | | | | | |
| (Street) | | | | | | Form filed by More than One Reporting Person Person | | | | | | | | | | | | |
| FRANCISCO CA 94080 | | | | Ru | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | |
| (City) (State) (Zip) | | | | | | 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. | | | | | | | | | | | | |
| | | Se | curitie | s A | cquired, D | isp | osed o | f, or Be | neficia | icially Owned | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execution Date | | | , Transaction Code (Instr. 5 | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | d Secur Benef Owne | cially I Following | Forn (D) o | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount | nt (A) or (D) | | Trans | Reported Transaction(s) (Instr. 3 and 4) | | | msu. 4) | |
| | | 7 | | tive Securities Acquired, Disposed of, or Beneficiants, calls, warrants, options, convertible securitie | | | | | | | | Owned | | • | , | - 1 | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise (Instr. 3) Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year) | | | oate, | | ransaction of Code (Instr. Deriva | | | Expiration Da | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivativ Security (Instr. 5) | | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Co | | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | Amount or Number of Shares | | | | | | | | |
| Stock Option (Right to buy) | \$7.12 | 06/09/2023 | | | A | | 29,532 | | 06/09/2024 ⁽¹⁾ | 06 | 5/08/2033 | Common Stock | 29,532 | \$0.00 | 29,53 | 2 | D | |

Explanation of Responses:

1. Option granted pursuant to the Tenaya Therapeutics, Inc. 2021 Equity Incentive Plan. Option will vest in full upon the first anniversary of the date of grant or, if earlier, the day immediately before the date of the next annual meeting of stockholders that occurs after the grant date, subject to the Reporting Person continuing to be a service provider to the Issuer through each applicable vesting date.

Remarks:

/s/ Jennifer Drimmer Rokovich, 06/12/2023 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.