Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

Nashington, D.C. 20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response	: 0.5							

					or Se	ction 3	(h) of the Ir	ivestme	nt Cor	mpany Act o	1940					
Name and Address of Reporting Person* Ali Faraz				2. Issuer Name and Ticker or Trading Symbol Tenaya Therapeutics, Inc. [TNYA]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
THI THE												X Dire			Owner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 02/16/2024							X Office below	er (give title w)	Other below	(specify /)	
C/O TENAYA THERAPEUTICS, INC.					02/10/2024								•	Chief Executive Officer		
171 OYSTER POINT BLVD., 5TH FLOOR				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)				,									X Forr	n filed by On	e Reporting Pe	rson
SOUTH	\sim	A 9	4080										Forr Pers		re than One Re	porting
						Rule 10b5-1(c) Transaction Indication										
(City)	(St	ate) (Z	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.											
		Table	I - Non-l	Deriva	tive S	ecur	rities Acq	uired,	Dis	posed of	or Be	nefici	ally Ow	ned		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)				Executi ay/Year) if any		ution Date,	Transaction Dis Code (Instr. 5)		Disposed C	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price		action(s) 3 and 4)		(Instr. 4)	
Common	Stock			02/16/2	2024			S ⁽¹⁾		6,358	D	\$5.8	6(2) 11	3,079(3)	D	
		Tal					ies Acqu varrants,							d		
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date Execution Date, if any (Month/Day/Year)			Transaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title a Amount Securitie Underlyi Derivativ Security 3 and 4)	of s ng	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: y Direct (D) or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)				

Explanation of Responses:

- 1. Shares sold to cover tax withholding obligations in connection with the vesting of restricted stock units awarded on February 15, 2023.
- 2. Represents the weighted average sales price. The shares were sold in multiple transactions at prices ranging from \$5.61 to \$6.15. Reporting Person undertakes to provide Tenaya Therapeutics, Inc., any security holder of Tenaya Therapeutics, Inc., 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 ranges set forth in this footnote.

Exercisable

and 5)

(A) (D)

3. Includes 93,750 shares of Tenaya Therapeutics, Inc. common stock that will be issued to the Reporting Person upon vesting of restricted stock units.

Code

/s/ Jennifer Drimmer Rokovich, Attorney-in-Fact

Amount or Number

of Shares

Expiration Date

02/16/2024

** 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.