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FORM 4		UNITED STATES SECURITIES AND EXCHANGE COM Washington, D.C. 20549												MISSION OMB APPROVAL				/AL
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													ated av	verage burden	0.5
1. Name and Address of Reporting Person <sup>*</sup> Bensen Daniel				2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Tyra Biosciences, Inc.</u> [ TYRA ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O TYRA BIOSCIENCES, INC. 2656 STATE STREET					3. Date of Earliest Transaction (Month/Day/Year) 11/02/2021									X Officer (give title Other (specify below) Chief Operating Officer				
(Street) CARLSBAD CA		92008		4. If <i>F</i>	4. If Amendment, Date of Orig					iginal Filed (Month/Day/Year)				6. Individual or Joint/Group Filing (Check Applicabl Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(S	tate)	(Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			Date		Exec ) if any	Execution Date		Transaction Disposed Code (Instr. 5)		d Of (D) (Instr. 3, 4		nd	Securitie Beneficia Owned F Reported	es Forn ally (D) c Following (I) (I) d		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code \	/	Amount	(A) or (D) PI		e	Transact (Instr. 3 a	on(s) and 4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Title of rrivative str. 3) 2. 3. Transaction Date Or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any C		ransacti ode (Ins	on of btr. De Se Ac (A) Dis of	5. Number		6. Date Exercisa Expiration Date		able and 7. Title an e of Securit ar) Underlyin Derivative		d Amoui ies g Securit	nt 8 D S	Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			с	ode V	(A)		(D)	Date Exercisable			Title	or Numbe of	er					
\$24.15	11/02/2021			A	83,	626		(1)	1	1/01/2031	Common Stock			\$0.00	83,626		D	
\$24.15	11/02/2021			A	7,	7,964		(2)		1/01/2031	Common Stock 7,964		4	\$0.00	7,964		D	
\$24.15	11/02/2021			A	7,	964		(2)	1	1/01/2031	Common Stock	7,964	4	\$0.00	7,964		D	
	FORM his box if no lo 16. Form 4 or ons may contin on 1(b). d Address of Daniel (Fi A BIOSCI (TE STREH AD C, (S) ecurity (Inst 2. Conversion or Exercise Price of Derivative Security \$24.15 \$24.15	FORM 4 his box if no longer subject to 16. Form 4 or Form 5 ons may continue. See ion 1(b). d Address of Reporting Person* Daniel (First) A BIOSCIENCES, INC. (TE STREET AD CA (State) Tak ecurity (Instr. 3) 2. (State) 3. Transaction Date (Month/Day/Year) 2. (State) 3. Transaction (Month/Day/Year) 3. State (Month/Day/Year) 3. Stat	FORM 4 UNITED his box if no longer subject to 16. Form 4 or Form 5 ons may continue. See ion 1(b). d Address of Reporting Person* Daniel (First) (Middle) A BIOSCIENCES, INC. ATE STREET AD CA 92008 (State) (Zip) Table I - Non ecurity (Instr. 3) Conversion of Exercise Price of Derivative Security Security (11/02/2021) \$24.15 11/02/2021	FORM 4 UNITED STATEMENT  his box if no longer subject to 16. Form 4 or Form 5 ons may continue. See ion 1(b). Filed  d Address of Reporting Person* Daniel  (First) (Middle)  A BIOSCIENCES, INC. TE STREET  AD CA 92008 (State) (Zip)  Fable I - Non-Derivat C(e.g., pr C)  2. Conversion Date Security (Instr. 3)  2. Table II - Derivati (e.g., pr C)  2. Conversion Date Security  3. Transaction Date (Month/Day/Year) (Month/Day/Year)  2. S24.15 11/02/2021  S24.15 11/02/2021  S24.15 11/02/2021  S24.15 11/02/2021  S24.15 I1/02/2021  S24.15 I1/02/2021  S24.15 I1/02/2021 I I I I I I I I I I I I I I I I I I I	FORM 4 UNITED STATES	FORM 4 UNITED STATES SECU his box if no longer subject to 10. Form 4 or Form 5 nor may continue. See on 1(b).  STATEMENT OF CH To section 30 d Address of Reporting Person* Daniel (First) (Middle) A BIOSCIENCES, INC. TE STREET AD CA 92008 (State) (Zip) Catebox (Zi	FORM 4       UNITED STATES SECURING         Is box if no longer subject to informany continue. See on 1(b).       STATEMENT OF CHAIN         Sind particular informany continue. See on 1(b).       Filed pursuant to Section 30(b) of secti	FORM 4       STATEDESCURPTING         STATEDESCURPTING         STATEDESCURPTING Person*         Daniel       2. Issuer Name and Tic         (First)       (Middle)         A BIOSCIENCES, INC.       3. Date of Earliest Trans         (First)       (Middle)         A BIOSCIENCES, INC.       3. Date of Earliest Trans         (State)       (Zip)         Table 1 - Non-Derivative Securities Act         Councip         (State)         (State)       (Zip)         Caller I - Non-Derivative Securities Act         Councip         2. Transaction       2A. Deemed         Date       (Month/Day/Vear)       Shumber         Or Exercise       3. Transaction       3A. Deemed       Shumber         Conversion       3. Transaction       Shumber       Derivative Securities Acquired         Conversion       3. Transaction       Shumber       Derivative Securities         Security       Shumber       Or Exercise       Shumber         Or Exercise       Shumber       Or O	FORM 4       UNITED STATES SECURITES AND Washington, D.C.4         his box if no longer subject to 10.5 rorm a or Form 5 as may continue. See on 10.       STATEMENT OF CHANGES IN BIS         Address of Reporting Person*	STATES SECURITES AND E: Washington, D.C. 2054         STATEMENT OF CHANGES IN BEIN or Section 30(h) of the Investment Conson 30(h) of th	FORM 4       UNITED STATES SECURITIES AND EXCHA Washington, D.C. 20549         STATEMENT OF CHANGES IN BENEFICI Dation of the forwarine and or form 5 mismay continue. See on 10).         Filed pursuant to Section 16(a) of the Securities Exchan or 10.         Address of Reporting Person*	Constrained         Constrained of	Control of promotion         Statement of promotion <td>AD         CA         92008         2. State of carliest Transaction (Month/Day/Year)         5. Ref           AD         CA         92008         11/02/2021         4. If Amendment, Date of Original Filed (Month/Day/Year)         5. Ref           AD         CA         92008         11/02/2021         5. Ref           AD         CA         92008         11/02/2021         5. Ref           Cistate)         (Kitate)         (Zip)         1. If Amendment, Date of Original Filed (Month/Day/Year)         6. Indi           Cistate)         (Zip)         1. If Amendment, Date of Original Filed (Month/Day/Year)         6. Indi           Cistate)         (Zip)         1. If Amendment, Date of Original Filed (Month/Day/Year)         1.</td> <td>All control operations of the purper solution of the purper solution</td> <td>All CA       State of Earliest Transaction (Month/Day/Year)       S. Relationship of Reporting Person"       S. Relationship of Reporting Person Person Person Person P</td> <td>Image: bit in the bit of the bit option relation is an and control to be option relation is and the securities beckmaps Act of 1380         Image: bit option relation is and the securities beckmaps Act of 1380           Address of Reporting Person*         2: User Name and Ticker of Trainsaction (Month/Day/Year)         5. Relationship of Reporting Person*         5. Relationship of Reporting Person*         0. The option relation is an and the securities beckmaps Act of 1380         5. Relationship of Reporting Person*         0. The option relation is an and the securities beckmaps Act of 1380         5. Relationship of Reporting Person*         0. The option relation is an and the securities and</td> <td>Amount of the property of the property</td>	AD         CA         92008         2. State of carliest Transaction (Month/Day/Year)         5. Ref           AD         CA         92008         11/02/2021         4. If Amendment, Date of Original Filed (Month/Day/Year)         5. Ref           AD         CA         92008         11/02/2021         5. Ref           AD         CA         92008         11/02/2021         5. Ref           Cistate)         (Kitate)         (Zip)         1. If Amendment, Date of Original Filed (Month/Day/Year)         6. Indi           Cistate)         (Zip)         1. If Amendment, Date of Original Filed (Month/Day/Year)         6. Indi           Cistate)         (Zip)         1. If Amendment, Date of Original Filed (Month/Day/Year)         1.	All control operations of the purper solution	All CA       State of Earliest Transaction (Month/Day/Year)       S. Relationship of Reporting Person"       S. Relationship of Reporting Person Person Person Person P	Image: bit in the bit of the bit option relation is an and control to be option relation is and the securities beckmaps Act of 1380         Image: bit option relation is and the securities beckmaps Act of 1380           Address of Reporting Person*         2: User Name and Ticker of Trainsaction (Month/Day/Year)         5. Relationship of Reporting Person*         5. Relationship of Reporting Person*         0. The option relation is an and the securities beckmaps Act of 1380         5. Relationship of Reporting Person*         0. The option relation is an and the securities beckmaps Act of 1380         5. Relationship of Reporting Person*         0. The option relation is an and the securities and	Amount of the property

Explanation of Responses:

1. 1/48th of the shares subject to the option vest monthly following November 2, 2021, the vesting commencement date, subject to the Reporting Person's continuous service to the Issuer through each vesting date.

2. The option vests based on achievement of a performance objective.

**Remarks:** 

<u>/s/ John Healy, Attorney-in-Fact</u>

<u>11/04/2021</u> Date

\*\* Signature of Reporting Person

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

 $^{\ast}$  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.