## FORM 4

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: | : 0.5     |

| Check this box if no longer subject<br>to Section 16. Form 4 or Form 5<br>obligations may continue. See<br>Instruction 1(b). | -       | IT OF CHANGES IN BENEFICIAL OWN<br>pursuant to Section 16(a) of the Securities Exchange Act of 1934<br>or Section 30(h) of the Investment Company Act of 1940 | OMB Number: 3235-0287<br>Estimated average burden<br>hours per response: 0.5  |                                      |  |  |  |  |  |  |
|--|---------|---|---|--------------------------------------|--|--|--|--|--|--|
| 1. Name and Address of Reporting Person*<br><u>Tada Hiroomi</u>  |         | 2. Issuer Name and Ticker or Trading Symbol<br><u>Tyra Biosciences, Inc.</u> [ TYRA ]   | (Check all applicat<br>Director<br>X Officer (gi  | 10% Owner<br>ve title Other (specify |  |  |  |  |  |  |
| (Last) (First) (I<br>C/O TYRA BIOSCIENCES, INC.<br>2656 STATE STREET   | Middle) | 3. Date of Earliest Transaction (Month/Day/Year)<br>09/15/2022  | below)  | below)<br>ef Medical Officer         |  |  |  |  |  |  |
| (Street)<br>CARLSBAD CA 92008<br>(City) (State) (Zip)  |         | 4. If Amendment, Date of Original Filed (Month/Day/Year)  | 6. Individual or Joint/Group Filing (Check Applicable<br>Line)<br>X Form filed by One Reporting Person<br>Form filed by More than One Reporting<br>Person |                                      |  |  |  |  |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |         |   |   |                                      |  |  |  |  |  |  |

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transa<br>Code (<br>8) |   |        |               |          | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |
|---------------------------------|--|---|------------------------------|---|--------|---------------|----------|---|---|---|
|                                 |  |   | Code                         | v | Amount | (A) or<br>(D) | Price    | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                |   | (Instr. 4)  |
| Common Stock                    | 09/15/2022                                 |   | <b>A</b> <sup>(1)</sup>      | v | 612    | Α             | \$7.6585 | 81,237  | D   |   |

|   |  |  |  |      |   |     |     | <u> </u>  | 1                  | _   |  |  |  |  |  |
|---|--|--|--|------|---|-----|-----|---|--------------------|---|--|--|--|--|--|
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned<br>(e.g., puts, calls, warrants, options, convertible securities) |  |  |  |      |   |     |     |   |                    |   |  |  |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)   | itle of 2. 3. Transaction Date 4.<br>Ivative or Exercise (Month/Day/Year) if any Code (I |  |  |      |   |     |     | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>3 and 4) |                    | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|   |  |  |  | Code | v | (A) | (D) | Date<br>Exercisable   | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares   |  |  |  |  |

Explanation of Responses:

1. These shares were acquired under the Issuer's 2021 Employee Stock Purchase Plan.

**Remarks:** 

/s/ Ali D. Fawaz, Attorney-in-09/19/2022 Fact

\*\* Signature of Reporting Person Date

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.