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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| | tion 1(b). | iuc. See | | Filed | pursua or Se | nt to S ection 3 | Section 30(h) o | 16(a) f the Ir | of the S vestme | ecuriti nt Cor | es Exchang npany Act o | e Act of f 1940 | 1934 | | | nours | per re | esponse: | 0.5 |
|---|--|--|--------|----------------------------------|--|---------------------|---|-------------------|--|--------------------|-------------------------------------|--|---------------------------|-----------------------|---|--|--------------------------------------|--|--|
| Name and Address of Reporting Person* Nagendran Sukumar | | | | | 2. Issuer Name and Ticker or Trading Symbol Taysha Gene Therapies, Inc. [TSHA] | | | | | | | | | | er (give title | | rson(s) to Is | | |
| (Last) (First) (Middle) C/O TAYSHA GENE THERAPIES, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/02/2022 | | | | | | | | | Office below | | | Other (s | specify | |
| 3000 PEGASUS PARK DRIVE, SUITE 1430 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| (Street) DALLAS | S TX | X 7 | 5247 | | | | | | | | | | | X | | filed by Mo | | oorting Person | |
| (City) | (St | ate) (ž | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | or B | enefic | ially | Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Exe Day/Year) if a | | A. Deemed execution Date, fany Month/Day/Year) | | | | es Acquired (A Of (D) (Instr. 3, | | 3, 4 and Se Be Ov | | 5. Amount of Securities Beneficially Owned Following | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) or (D) P | | . | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock 02/02/2 | | | | | 2022 | | | | P | | 10,000 | A | \$8 | \$8.01 | | 29,226 | | D | |
| | | Tal | | | | | | | | | osed of, convertib | | | | wne | t | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | emed ion Date, //Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | te | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | Deri Secu (Inst | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | | or Number of Shares | | | | | | | |

Explanation of Responses:

Remarks:

/s/ Kamran Alam, Attorney-in-02/03/2022

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.