FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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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 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* Gelhaus Ken					2. Issuer Name and Ticker or Trading Symbol Alpha Teknova, Inc. [TKNO]						(Che	ck all applic	able)	g Person(s) to Issue 10% Own Other (sp		ner
	`	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/17/2021						>	below)		Commercial Officer		
(Street) HOLLISTER CA 95023 (City) (State) (State) (State) (City) (State) (State) (A. If Amendment, Date of Original Filed (Month/Day/Year) (Individual or Joint/Group Filing (Check Application of Line) X Form filed by One Reporting Person Form filed by More than One Report Person Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Tr			ransactio			a. Transact Code (Ins	4. Securit Disposed 5)	ies Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amount of 6 Securities F Beneficially (I		Form: Direct (D) or Indirect (I) (Instr. 4)		'. Nature of ndirect Beneficial Ownership Instr. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
		Transa Code	nsaction of			6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and of Securitie Underlying Derivative (Instr. 3 and		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to buy)	\$25.1	11/17/2021		A		85,000		(1)	11/17/2031 ⁽²⁾	Common Stock	85,000	\$0.00	85,000)	D	

- 1. 1/4th of the original number of shares subject to the option shall vest on November 15, 2022 and the remainder of the shares subject to the option shall vest in equal monthly installments thereafter over 36
- $2. \ On \ November \ 23, 2021, the reporting person filed a Form 4 which inadvertently reported that the expiration date of the stock option is November 17, 2021. The correct expiration date of the option is November 17, 2021. The correct expiration date of the option is November 18, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option is November 19, 2021. The correct expiration date of the option date$ 17, 2031.

Remarks:

/s/ Damon A. Terrill, Attorneyin-Fact for Ken Gelhaus

11/23/2021

** Signature of Reporting Person

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.