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 to Section 16. Form 4 or Form 5 obligations may continue. See									
	obligations may continue. See Instruction 1(b).									

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

					01	Jeca	1011 30	(II) OI LIIC	IIIVESIIIIE	III CC	лпрапу Аст	01 1340									
Name and Address of Reporting Person* Hood Lisa						2. Issuer Name and Ticker or Trading Symbol Alpha Teknova, Inc. [TKNO]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					1	ripid remova, me. [11010]									Directo			10% Ov	· I		
															below)	(give title		Other (s below)	specify		
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 02/04/2022									Chief Pec	ple C	Officer			
C/O ALPHA TEKNOVA, INC.																					
2451 BERT DRIVE						A If A ward ward Date of Original Elled (About 10. 11.)									6 Individual or Joint/Croup Filing (Chook Applicable						
							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) HOLLIS	TER C.	Δ	95023											X Form filed by One Reporting Person					n		
	TER C.														Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																		
		Tab	le I - No	n-Deriv	ativ	e Se	curit	ties Ac	quired	, Dis	sposed c	of, or Be	neficia	lly (Owned						
1. Title of	Security (Ins	tr. 3)		2. Transa	action		A. Deemed Execution Date,		3. 4. Securities Acquir Transaction Disposed Of (D) (Ins					1.5)	5. Amount of Securities				7. Nature of Indirect		
(Month/Da						ar) i	f any			Code (Instr.		G. (2) (s.	0,	Benefic		ally (D) Following (I) (I d		or Indirect Instr. 4)	Beneficial Ownership (Instr. 4)		
							onen	ionini/Day/Tear)	· -	. 		(A) or Drice		\dashv	Reported						
									Code	٧	Amount	(D)	Price		(Instr. 3 and 4)						
Common Stock 02/04/2						2022		M		30,462	0,462 A \$1		458	30,462			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
											converti										
1. Title of	2.	3. Transaction Date (Month/Day/Year)	3A. Deeme	Date, Ti			r. Derivative		6. Date Exerc			7. Title and Am			Price of	9. Numbe		10.	11. Nature		
Derivative Security	Conversion or Exercise		Execution if any		Transa Code (I				Expiration (Month/D			of Securities Underlying		Derivative Security		derivative Securities		Ownership Form:	Beneficial		
(Instr. 3)	Price of Derivative		(Month/Da	y/Year)	B)	Securities Derivative Securities Acquired (Instr. 3 and 4)								' (Ir	nstr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)		
	Security				(A) or Disposed								•			Following Reported		(I) (Instr. 4)	, ,		
							of (D) (Instr. 3, 4 and 5)									Transaction(s)					
								x110 3)					Amoun	\exists		(
							1						or Numbe								
						l	1	_	Date		Expiration		of	1							
					Code	v	(A)	(D)	Exercisa	ble	Date	Title	Shares	+					-		
Incentive Stock												Common									
Option (right to buy)	\$1.8458	02/04/2022			M			30,462	(1)		12/23/2030	Stock	30,46	2	\$0.0	82,01	4	D			

Explanation of Responses:

1. 1/4th of the original number of shares subject to the option shall vest on December 14, 2021, and 1/48th of the original number of shares subject to the option shall vest on a monthly basis thereafter, subject to the Reporting Person's continued service to the Issuer through each such vesting date.

By: Damon A. Terrill For: Lisa **Hood**

** Signature of Reporting Person Date

02/07/2022

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.