FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549
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<b>STATEMENT</b>	<b>OF CHANGE</b>	S IN BENE	FICIAL C	<b>WNERS</b>	HIP

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

1. Name and Address of Reporting Person* <u>Ismagilov Rustem F.</u>			Tal	2. Issuer Name and Ticker or Trading Symbol Talis Biomedical Corp [ TLIS ]					(Ch	eck all appli X Directo	or	10% Ov	ner		
(Last)	(Fi	rst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023						Officer below)	(give title	Other (s below)	pecify	
C/O TALIS BIOMEDICAL CORPORATION 1100 ISLAND DRIVE SUITE 101				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person				
(Street) REDWC	OOD C	A	94065	- Du	lo í	1.OhE	1/0	\ Transa	otion Ind	diaation		Form f Persor	iled by More tha	an One Repo	rting
	(5)	tato)	(7in)	- _	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to						ed to				
(City)	(City) (State) (Zip) satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3 5) 5)			Benefici	es Formially (D) (I) (I)	m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	/ Amoun	(A) c	Price	Transac (Instr. 3	tion(s)		Instr. 4)	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)														
Security or Exercise (Month/Day/Year) if any Co		Transac	ransaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	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)			
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock option (right to buy)	\$0.5	06/09/2023		A		95,000		(1)	06/09/2033	Common Stock	95,000	\$0.00	95,000	D	

## **Explanation of Responses:**

1.1/12th of the shares subject to the option shall vest monthly over one year from the vesting commencement date.

## Remarks:

/s/ Gillian Green, Attorney-infact for Rustem F. Ismagilov

06/12/2023

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.