FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB	APPR	OVAL
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OMB Number:	3235-0104
Estimated average burden	
hours per response:	0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	ess of Reporting Pers Ventures GP,		2. Date of Event Requiring Statement (Month/Day/Year) 03/21/2024	3. Issuer Name and Ticker or Tra <u>LENZ Therapeutics</u> , <u>Ir</u>			
(Last) 667 MADISON 19TH FLOOR	(First) AVE.	(Middle)		Relationship of Reporting Pers (Check all applicable) Director Officer (give title below)	x	to Issuer 10% Owner Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)
(Street) NEW YORK (City)	NY (State)	10065 (Zip)					6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	Beneficially Owned (Instr. 4)		4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock, par value \$0.00001 per share	3,612,211	I	See footnotes ⁽¹⁾⁽²⁾

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Title

3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

4. Conversion

or Exercise Price of

Derivative Security

Amount

or Number of Shares 5. Ownership Form: Direct

(D) or Indirect (I)

(Instr. 5)

6. Nature of Indirect Beneficial Ownership

(Instr. 5)

1. Title of Derivative S	Security (Instr. 4)		2. Date Exerc Expiration D (Month/Day/	ate
			Date Exercisable	Expiration Date
1. Name and Address of Alpha Wave Ve				
(Last) 667 MADISON AV 19TH FLOOR	(First) /E.	(Middle)		
(Street) NEW YORK	NY	10065		
(City)	(State)	(Zip)		
1. Name and Address of Alpha Wave Gl				
(Last) 667 MADISON AV 19TH FLOOR	(First) /ENUE	(Middle)		
(Street) NEW YORK	NY	10065		
(City)	(State)	(Zip)		
1. Name and Address of Lunate Holding				
(Last) UNIT 1, FLOOR 1 ABU DHABI GLO				
(Street) AL MARYAH ISLAND, ABU DHABI	C0	00000		
(City)	(State)	(Zip)		
Name and Address of	of Reporting Person*			1

(Last)	(First)	(Middle)
OFFICE 410, RO	YAL GROUP HDQ	RTRS BUILDING
KHALIFA PARK	AREA	
(Street)		

Explanation of Responses:

1. Securities held by Alpha Wave Ventures II, LP ("Alpha Wave Ventures GP, Ltd ("Alpha Wave Ventures GP") is the general partner of Alpha Wave Ventures GP is a joint venture between Alpha Wave Global, LP ("Alpha Wave") and Lunate Holding RSC LTD ("Lunate"). Lunate is majority-owned by Chimera Investment LLC ("Chimera," together with Alpha Wave Ventures GP, Alpha Wave and Lunate, the "Reporting Persons"). Richard Gerson is the Chairman and Chief Investment Officer of Alpha Wave. Chimera is controlled by its board of directors. The managing partners of Lunate Capital Limited, a wholly-owned investment manager subsidiary of Lunate, manage the investment activities of Lunate.

2. For purposes of Section 16 of the Securities Exchange Act of 1934, each of the Reporting Persons expressly disclaims beneficial ownership of the securities reported herein except to the extent of his or its pecuniary interest therein, if any, and this report shall not be deemed an admission that any of the Reporting Persons is the beneficial owner of such securities for purposes of Section 16 or any other purpose.

Alpha Wave Global, LP, By: /s/ 03/28/2024 Richard Gerson, Chairman and **CIO** Alpha Wave Ventures GP, Ltd, By: 03/28/2024 /s/ Richard Gerson, Director Lunate Holding RSC LTD, By: /s/ 03/28/2024 Syed Basar Shueb Syed Shueb, **Director and Authorized Signatory** Chimera Investment LLC, By: /s/ Syed Basar Shueb Syed Shueb, 03/28/2024 Director and Authorized Signatory ** Signature of Reporting Person Date

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

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).