SEC For	rm 4																		
FORM 4 UNITE				STA	STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB APPROVAL				
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									OMB Estim	OMB Number: 3235-02 Estimated average burden		3235-0287		
1. Name and Address of Reporting Person* Beckman Daniella						r Name and Tick <u> Therapeut</u>			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner										
(Last) (First) (Middle) C/O TANGO THERAPEUTICS, INC.,					3. Date of Earliest Transaction (Month/Day/Year) 02/01/2024								below)	give title	Other (s below) ancial Officer		specify		
201 BROOKLINE AVE., SUITE 901					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) BOSTO	N M	ΙA	02215		Form filed by More th Person									e than	One Repo	rting			
(City) (State) (Zip)					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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Та	ble I - Nor	n-Deriva	ative S	ecurities Aco	quired	, Dis	posed o	of, o	r Bene	ficially	Owned						
1. Title of Security (Instr. 3) 2. Trans Date (Month/						2A. Deemed Execution Date, if any (Month/Day/Year	Code	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and 5) Securities Beneficially Owned Follo		Form (D) o		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	Amount		Price	Transacti	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 02/01					2024		Α		39,413	3 (1)	Α	\$0.00	39,	413		D			
						curities Acqu lls, warrants							Dwned						
1. Title of Derivative 2. 3. Transaction 3A. Deemed Security (Instr. 3) or Exercise Price of (Month/Day/Year) if any (Month/Day/Year)			Code (Instr.		Derivative	6. Date E Expiratio (Month/I	on Date		le and 7. Title and Amo of Securities Underlying Derivative Secu			Derivative de Security Se			10. Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownershi			

Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	Code (Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(Month/Day/Year)		Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securities Beneficially Owned Following Reported	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	(Instr. 4)	Transaction(s) (Instr. 4)		
Stock Option (Right to Buy)	\$12.28	02/01/2024		А		236,475		(2)	02/01/2034	Common Stock	236,475	\$0.00	236,475	D	

Explanation of Responses:

1. These shares are represented by restricted stock units (the "RSUs"). Each RSU represents a contingent right to receive one share of Common Stock of the Issuer. The RSUs will vest over a three year period at a rate of 1/3 on February 3, 2025, 1/3 on February 2, 2026 and 1/3 on February 1, 2027, subject to the Reporting Person's continuous service with the Issuer as of each such vesting date.

2. This option shall vest and become exercisable over a four-year period, at a rate of 25% on January 1, 2025, with the remaining option shares vesting in 36 equal monthly installments thereafter.

<u>/s/ Douglas Barry, attorney-in-</u> fact	02/05/2024
** 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.