Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20	549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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* Blackman Samuel C.					2. Issuer Name and Ticker or Trading Symbol Day One Biopharmaceuticals, Inc. [DAWN]											k all app Direc	licable) tor er (give title	Ū	ng Person(s) to Issuer 10% Owner Other (specifibelow)		
(Last) (First) (Middle) 2000 SIERRA POINT PARKWAY, SUITE 501					3. Date of Earliest Transaction (Month/Day/Year) 11/01/2022										Chief Medical Officer						
(Street) BRISBANE CA 94080 (City) (State) (Zip)			_ 2	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Ind Line) X	′						
		Table	I - Non-Der	vati	ve S	Secui	rities	Acc	quire	ed, D	isp	osed o	f, or E	Benefic	ciall	y Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				2A. Deemed Execution Date ar) if any (Month/Day/Ye		on Date,	T C	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				d 5)	Beneficially Owned Follow		Form (D) or Indire	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership		
										C	Amo	ount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Common	Stock		11/01/2	022					S ⁽¹⁾		10	0,000	D	\$20.00	05(2)	1,26	59,338	`			
Common	ommon Stock 11/0															1,000,000		I		By the 2021 Blackman Family LLC ⁽³⁾	
		Tal	ole II - Deriv (e.g.,									sed of, onvertil				Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ear) Execution Date, if any (Month/Day/Year) Transaction Code (Instr. Secution Acquired (A) of Disp of (D) (Instr. Secution Acquired (A) of Disp of (D) (Instr. Secution Date, if any of (D) (Instr. Secution Date, if a		Deriva Securi Acquir (A) or Dispos of (D) (Instr.: and 5)	tive ties ed sed 3, 4	Expiration (Month/Da			y/Year) Securities Underlying Derivative Security (Ins 3 and 4) Amotor Numl Expiration of		unt of rities rlying ative rity (Instr 4) Amoun or Numbe	De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)			

Explanation of Responses:

- 1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.
- 2. The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$19.57 to \$20.27 per share, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. The Reporting Person is the sole manager, and has shared voting and dispositive power with his wife as members. The Reporting Person continues to report beneficial ownership of all of the Issuer's Common Stock held by the 2021 Blackman Family LLC but disclaims beneficial ownership except to the extent of his and his wife's pecuniary interest therein.

Remarks:

/s/ Charles N. York II, as Attorney-in-Fact

11/03/2022

** 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.