FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

/ashington,	D.C.	20549	
rasinington,	D.C.	20040	

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* <u>Harris William G</u>					2. Issuer Name and Ticker or Trading Symbol SOLENO THERAPEUTICS INC [SLNO]								(CI	neck all app	ionship of Reportin all applicable) Director		rson(s) to Is 10% Ov		
(Last)	(Fir	rst) (N	/liddle)			3. Date of Earliest Transaction (Month/Day/Year) 06/06/2024									Office below	er (give title v)		Other (s below)	pecify
203 REDWOOD SHORES PKWY, STE 500				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) REDWO CITY	EDWOOD CA 94065				Rule 10b5-1(c) Transaction Indication									Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)			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.											ided to		
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or I	Ben	eficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Exec ay/Year) if any		Deemed cution Date, ly nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed C 5)						nd Securit Benefic Owned	rities eficially ed Following		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A)) or)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common	Stock			06/06/2	/2024				A		6,500(1)) A		\$ 0	15	5,401(2)		D	
		Tal									osed of, o					d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/			ansaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	nber					

Explanation of Responses:

- 1. These securities are restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of Common Stock. The RSUs shall vest on the earlier of the twelve-month anniversary of June 6, 2024 or the day before the next annual stockholder meeting, subject to the Reporting Person continuing to be a Service Provider through such date. The Reporting Person previously elected to defer receipt of the shares of Common Stock underlying RSUs upon vesting. In accordance with the Reporting Person's deferral election the vested shares will be delivered to the Reporting Person when the Reporting Person ceases to provide services to the Issuer or upon a change of control of the Issuer.
- 2. Certain of these securities are RSUs. Each RSU represents a contingent right to receive one share of Common Stock, subject to the applicable vesting schedule and conditions of each RSU.

/s/ Anish Bhatnagar, Attorney-06/10/2024 in-Fact

** 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.