FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(b) of the Investment Company Act of 1940

1 Name or	ud Address o	f Penorting Person*			2. Iss	suer Na	me ar		cker or		Symbol		15	5. Rela	tionshir	of Reportir	ng Per	son(s) to Is	suer
Name and Address of Reporting Person*     Page Tyler					2. Issuer Name and Ticker or Trading Symbol Cipher Mining Inc. [ CIFR ]								(Check all applicable)						
													X	Direc			10% Ov		
(Last)	(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)							X	below	er (give title		Other (s	specify
C/O CIPHER MINING INC.					12/01/2022								Chief Executive Officer						
1 VANDERBILT AVENUE, FLOOR 54, SUITE C																			
					4. If Amendment, Date of Original Filed (Month/Day/Year)								) 6	6. Individual or Joint/Group Filing (Check Applicable					
(Street)						and the state of original rines (months buy real)								_ine)					
NEW YO	NEW YORK NY 10017													X	Form filed by One Reporting Person				
														Form filed by More than One Reporting Person					
(City)	(S	tate) (2	Zip)																
		Table	I - N	lon-Deriva	tive	Secui	ities	Ac	quire	d, Di	sposed of	f, or E	Benefic	ially	Own	ed			
1. Title of S	Security (Ins	str. 3)		2. Transactio Date	2A. Deemed Execution Date,				3. 4. Securities Acquired (A) o Transaction Disposed Of (D) (Instr. 3, 4 a										7. Nature of Indirect
(Month/Day/Ye							Cod		Instr.	Disposed Of (D) (illistit, 3, 4 a		ıı. 3, 4 aii	u 5)	Beneficially Owned Following		(D) o	r Indirect	Beneficial Ownership	
					- [	(		,				(A) or		Repor					(Instr. 4)
										V	Amount	(A) or (D)	Price		(Instr. 3 and 4)				
Common Stock 12/01/202						22					35,000	D	\$0.81	94(1)	3,120,614			D	
		Tal	ole II	l - Derivati	ve Se	ecurit	ies A	Acq	uired	, Disp	osed of,	or Be	neficia	ally (	Owne	t			
				(e.g., pu	ıts, ca	alls, v	varra	ants	, opti	ions,	convertib	le se	curitie	s)					
1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any		4. Transa Code (		5. Number of Derivative Securities		Expiration e (Month/Day			7. Title and Amount of Securities		Der Sec	rice of ivative urity	9. Number derivative Securities Beneficially		10. Ownership Form:	Beneficial
(Instr. 3)	Price of Derivative Security (Month/Day/Year)			itti/Day/Tear)	8)	A		Acquired		De			Underlying Derivative Security (Instr		tr. 5)	Owned Following	´   (	Direct (D) or Indirect (I) (Instr. 4)	(Instr. 4)
						(A) or Disposed of (D) (Instr. 3, 4 and 5)		3			3 and		"		Reported Transaction(s		1		
															(Instr. 4)	11(3)			
													Amount	nt					
													or Number						
					Code V		(A) (D)		Date Exer	cisable	Expiration Date	Title	of Shares						

## **Explanation of Responses:**

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$0.810 to \$0.86835, 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.

## Remarks:

/s/ William Iwaschuk,

Attorney-in-Fact for Tyler

12/02/2022

Page \*\* 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.