SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION Washington, D.C. 20549

OMB APPROVAL

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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

			or Se	ection 3	30(h) of	the Investment Company A	Act o	f 1940				
1. Name and Ad	Requirin (Month/E	2. Date of Event Requiring Statement (Month/Day/Year) 07/14/2021		3. Issuer Name and Ticker or Trading Symbol <u>Sight Sciences, Inc.</u> [SGHT]								
(Last) (First) (Middle) 9 WEST 57TH STREET 36TH FLOOR					4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner				 If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing 			
(Street) NEW YORK NY 10019					Officer (give Other (s title below) below)				Check Applicable Line) Form filed by One Reporting Person			
(City)	(State)	(Zip)										
			Table I - No	on-De	erivat	ive Securities Bene	efici	ally Ow	ned			
1. Title of Security (Instr. 4)						2. Amount of Securities Beneficially Owned (Inst 4)	r.	3. Owne Form: D (D) or In (I) (Instr.	irect direct		ure of Indired rship (Instr. 5	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
			Expiration D	. Date Exercisable and xpiration Date Month/Day/Year)		3. Title and Amount of Secu Underlying Derivative Secu (Instr. 4)			4. Conversion or Exercise Price of		5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr
			Date Exercisable	Expii Date	ration	Title	Nu	nount or mber of ares	Deriva Securi	tive	Direct (D) or Indirect (I) (Instr. 5)	Ownership (Instr. 5)
Series E Convertible Preferred Stock		(1)) (1)		Common Stock, \$0.001 par value per share ("Common Stock")	3,7	780,790	(1)		I	See footnote ⁽²⁾	
Series F Convertible Preferred Stock		(1)	(1)	Common Stock	1,3	371,246	(1)	Ι	See footnote ⁽²⁾	
1. Name and Address of Reporting Person [*] D1 Capital Partners L.P.						_				1	1	
(Last) (First) (Middle) 9 WEST 57TH STREET 36TH FLOOR												
(Street) NEW YORK NY 10015			10019									
(City) (State) (Zip)												
1. Name and Address of Reporting Person [*] Sundheim Daniel S.												
(Last) (First) (Middle) C/O D1 CAPITAL PARTNERS L.P.												
9 WEST 57T	H STREET	7, 36TH FL(OOR									
(Street)												

NEW YORK	NY	10019
(City)	(State)	(Zip)

Explanation of Responses:

1. The preferred stock is convertible into Common Stock on a 2 for 1 basis at the holder's election and will automatically convert upon closing of the initial public offering of the Issuer's Common Stock. The shares have no expiration date.

2. This statement is filed by D1 Capital Partners L.P. (the "Investment Manager") and Daniel Sundheim ("Mr. Sundheim"). The foregoing persons are hereinafter sometimes referred to as the "Reporting Persons." The Investment Manager is a registered investment adviser and serves as the investment manager of private investment vehicles and accounts, including D1 Capital Partners Master LP (the "Investment Vehicle"). Mr. Sundheim may be deemed to beneficially own the reported securities by virtue of the fact that Mr. Sundheim indirectly controls the Investment Manager. The filing of this statement should not be construed as an admission that any Reporting Person is, for the purposes of Section 16 of the Securities Exchange Act of 1934, as amended, the beneficial owner of the securities reported except to the extent of its pecuniary interest therein.

<u>D1 Capital Partners, L.P.,</u>	<u>07/14/2021</u>			
<u>by: /s/ Amanda Hector</u>				
/s/ Daniel S. Sundheim	07/14/2021			
** 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 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).

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.