FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF	CHANGES	IN BE	NEFICIAL	OWNERSH	ΙΙΡ

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average t	ourden							
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(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Chiniara Ellen					2. Issuer Name and Ticker or Trading Symbol Kymera Therapeutics, Inc. [KYMR]								5. Relationship of Reporting (Check all applicable) Director			Perso	10% Ow	ner
(Last) (First) (Middle) C/O KYMERA THERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 01/03/2023								X	X Officer (give title Other (specify below) Chief Legal Officer				pecify
200 ARSENAL YARDS BLVD. SUITE 230 (Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
WATER	FOWN I	ИA	02472								X	Form filed by One Reporting Person Form filed by More than One Reporting Person				I		
(City)	(State)	(Zip)											T CISOII				
		Та	ble I - Non-	Derivat	ive S	ecuritie	s Acc	quired,	Dis	posed o	of, or Be	enefic	ially	Owned				
Date			2. Transact Date [Month/Day	Execution Date,		Date,	, Transaction Disposed O Code (Instr.		ties Acquired (A) or d Of (D) (Instr. 3, 4 a		5. Amoun Securities Beneficia Owned For Reported		s Form ally (D) o ollowing (I) (Ir		Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	Amount (A) or (D)		ce	Transacti (Instr. 3 a	ction(s)			.msu. 4)	
Common Stock				01/03/2	3/2023			A		37,500 ⁽¹⁾ A		\$ \$	0.00	0 37,500			D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	e V	(A)		Date Exercisabl		xpiration ate	Title	Amou or Numb of Sha	er		Transaction(s) (Instr. 4)			
Stock Option (Right to Buy)	\$24.84	01/03/2023		A		225,000		(2)	0	1/02/2033	Common Stock	225,0	000	\$0.00 225,000		00	D	

Explanation of Responses:

- 1. Represents restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of the Issuer's common stock upon vesting and settlement. The RSUs shall vest in four equal annual installments following January 3, 2023, subject to the reporting person's continued employment through each vesting date.
- 2. 25% of the shares underlying this stock option shall vest on January 3, 2024, with the remainder vesting in thirty-six (36) equal monthly installments thereafter, subject to the reporting person's continued employment through each vesting date.

Remarks:

/s/ Bruce Jacobs, as Attorney-

in-Fact

** Signature of Reporting Person

Date

01/04/2023

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.