FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Washington, D.C. 20549	

vvasnington,	D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-028										
Estimated average burden										
hours per response	: 0.5									

(Instr. 4)

05/23/2024

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

					or	Section 30	(h) of the	e Inves	tment	Company Act	of 1940)				
1. Name and Address of Reporting Person* Chadwick Jeremy G					2. Issuer Name and Ticker or Trading Symbol <u>Kymera Therapeutics, Inc.</u> [KYMR]							check all	ship of Reporting Person(s) to applicable)			
(Last)	(Fi	rst) (I	Middle	- /	3. Date of Earliest Transaction (Month/Day/Year) 05/23/2024 Director 10% Owner X Officer (give title below) Chief Operating Officer									r (specify v)		
C/O KYMERA THERAPEUTICS, INC. 500 NORTH BEACON STREET, 4TH FLOOR				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) WATERTOWN MA 02472												F	orm filed by One orm filed by Mo erson			
(City)	(Si	tate) (Ž	Zip)		Rule 10b5-1(c) Transaction Indication											
			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.													
		Table	1 - 1	Non-Deriva	tive	Securit	ties A	cquir	ed, C	Disposed o	of, or l	Benefici	ally O	vned		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution Date,		Date,	Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and		d (A) or r. 3, 4 and 8	5) Se Be Ov	Amount of curities neficially yned Following	6. Ownership Form: Direct (D) or Indirect (I)	of Indirect Beneficial Ownership	
						Code	v	Amount	(A) or (D)	Price	Tra	ported insaction(s) str. 3 and 4)	(Instr. 4)	(Instr. 4)		
Common	Stock			05/23/202	4			S ⁽¹⁾		2,575	D	\$34.992	21(2)	44,183	D	
		Tal	ble	II - Derivati (e.g., pu				•	•	sposed of s, converti	•		-	ned		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if ar	Deemed cution Date, ny nth/Day/Year)		nsaction de (Instr. I	5. Number of Derivative Securitie Acquired (A) or Disposed of (D)	Exp (Mo	iratio	cercisable and n Date ay/Year)	Amo Secu Unde Deriv	le and unt of rities erlying vative rity (Instr. d 4)	8. Price Derivati Security (Instr. 5	derivative Securities	Ownersh Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership (Instr. 4)

1. Represents shares required to be sold by the reporting person to cover tax withholding obligations in connection with the vesting of restricted stock units. Such sales were automatic and not in the discretion of the reporting person.

(Instr. 3, 4 and 5)

(A) (D)

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$34.65 to \$35.2963, 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.

Date

Exercisable

Expiration

Date

/s/ Bruce Jacobs, as Attorneyin-Fact

Title

Amount or Number

Shares

** 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).

Code

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.