SEC Form 4													
FORM 4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Section 16. Form 4 or Form 5 obligations may continue. See									OMB Number:         3235-0287           Estimated average burden            hours per response:         0.5			
1. Name and Address of Reporting Perso Sandor Victor	n <sup>*</sup>		er Name <b>and</b> Ticker Iera Therapeu						k all applicable)	orting Person(s) to I	ssuer Owner		
(Last) (First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/18/2024							itle Other below	(specify )		
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) Form filed by One Reporting Person				
(Street) WATERTOWN MA	02472	Rule	10b5-1(c) 1	Trans	acti	on Indica	ition		Form filed by Person	More than One Rep	porting		
(City) (State)	(Zip)	Cr	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.								led to		
Ta	able I - Non	-Derivative S	ecurities Acqu	uired,	Disp	oosed of, c	or Ben	eficially	Owned				
, , , , , , , , , , , , , , , , , , ,		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Followir Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)			
	Table II - [	Dorivativo So	curitias Acqui	rod D	lienc	sed of or	Ronof	icially (	)wnod				

			Table II - Deriv (e.g.,					uired, Dis s, options,	•			Owned			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Mont		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		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 Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$31.2	06/18/2024		A		16,000		(1)	06/17/2034	Common Stock	16,000	\$0.00	16,000	D	

Explanation of Responses:

1. The shares underlying this stock option shall vest in full upon the earlier to occur of (i) June 18, 2025 and (ii) the date of the next annual meeting of the Issuer's stockholders.

<u>/s/ Bruce Jacobs, as Attorney-</u> in-Fact	06/20/2024
** Signature of Reporting Person	Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\star}$  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.

## date of the next annual meeting of the Issuer's stockholder <u>/s/ Bruce Jacobs, as Attorney-</u>06/