Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549
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**STATEME** 

IN I OF CHANGES IN DENEFICIAL OWNERSHIP	OMB Numbe
	Estimated av
	hours per res

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average bu	urden							
hours per response:	0.5							

1. Name and Address of Reporting Person*  Gollob Jared  (Last) (First) (Middle)  C/O KYMERA THERAPEUTICS, INC.  200 ARSENAL YARDS BLVD., SUITE 230							Issuer Name and Ticker or Trading Symbol     Kymera Therapeutics, Inc. [ KYMR ]  3. Date of Earliest Transaction (Month/Day/Year) 05/04/2022									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  Chief Medical Officer				vner
(Street) WATER (City)		tate)	02472 (Zip)	n-Doris	-	If Amendment, Date of Original Filed (Month/Day/Year)      tive Securities Acquired, Disposed of, or Benefice								Line	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of S	Security (Ins		1 - 1101	2. Trans						3. 4. Securities Acquired (A)					5. Amou		6. Ov	Ownership	7. Nature	
	, (	<b>-</b> ,		Date (Month)	/Day/Ye	ear)	Execution Date, if any (Month/Day/Year)		΄ Ι	Transac Code (In 8)		Disposed Of (D) (Instr. 3,				Benefici		(D) o	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership
						(Month Bay)			/				(	(A) or (D) Price		Reporte Transaci (Instr. 3	d tion(s)			(Instr. 4)
Common Stock 05				05/0	4/202	1/2022				M		10,20	18	A	\$1.3	1 47	,465	D		
Common Stock			05/0	04/2022					M		9,792		A	\$2.0	8 57	,257		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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transa Code (l 8)		n of		Ex	6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Ar of Securities Underlying Derivative Sec (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Da Ex	ite ercisabl		xpiration ate	Title	O N	Amount or Number of Shares					
Stock Option (Right to Buy)	\$1.31	05/04/2022			M			10,208		(1)	1	0/31/2028	Comr		0,208	\$0.00	29,799	9	D	
Stock Option (Right to Buy)	\$2.08	05/04/2022			M			9,792		(2)	0	5/22/2029	Comr		9,792	\$0.00	109,02	20	D	

## Explanation of Responses:

- 1. Twenty-five percent (25%) of the shares underlying this stock option vested on September 12, 2019 and the remaining shall vest in equal monthly installments over the remaining thirty-six (36) months, subject to the reporting person's continued employment through each vesting date.
- 2. The shares underlying this stock option shall vest in forty-eight (48) equal monthly installments following the vesting commencement date of February 7, 2019, subject to the reporting person's continued employment through each vesting date.

## Remarks:

/s/ Bruce N. Jacobs, as 05/04/2022 Attorney-in-Fact

\*\* 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.