FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
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

														- X					
1. Name and Address of Reporting Person* REYNO LEONARD				2. Issuer Name and Ticker or Trading Symbol C4 Therapeutics, Inc. [CCCC]							ck all applica Director	tionship of Reporting all applicable) Director		10% Ov	vner				
(Last)	`	First) UTICS, INC.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/14/2024						X	Officer (give title Other (spe below) Chief Medical Officer				pecify		
490 ARSENAL WAY #120				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	''							
(Street) WATER	TOWN M	1A	02472								X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				- 1			
(City)	(\$	State)	(Zip)		_ R	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.													
		Та	ble I - Nor	า-Deri	ivativ	ve Se	ecuritie	s Acc	quired,	Disp	osed c	of, or B	ene	ficially	Owned				
1. Title of Security (Instr. 3) 2. Trans. Date (Month/I				action 2A. Deemed Execution Date, if any (Month/Day/Yea		Date,	Transaction Disposed Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		A) or 3, 4 and 5)	Beneficially Owned Followin		Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									v	Amount	(A (D) or)	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)	
Common	Stock			02/1	14/20	4/2024			A		36,700 ⁽¹⁾ A		\$ <mark>0</mark>	98,000		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	Date Execution (Month/Day/Year) if any	3A. Deemed Execution Da if any (Month/Day/\)	ate,		5. Number Derivative Securities Acquired (or Dispose of (D) (Inst 3, 4 and 5)		ative Expiration Date (Month/Day/Yeared (A) posed (Instr.		Date	of Securities		curity	8. Price of Derivative Security (Instr. 5)		Ownersh Form: Direct (D or Indirect (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)		Date Exercisabl		xpiration ate	Title	or Nu	mount umber Shares		(Instr. 4)			
Stock Option (Right to Buy)	\$7.31	02/14/2024			A		165,300		(2)	02	2/13/2034	Commo Stock	n 10	65,300	\$0	165,30	00	D	

Explanation of Responses:

- 1. Represents restricted stock units ("RSUs"). Each RSU represents the 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 the grant date, with the first installment vesting on February 14, 2025.
- 2. The shares underlying this option shall vest and become exercisable in sixteen equal quarterly installments following the grant date, with the first installment vesting on May 14, 2024.

Remarks:

/s/ Jolie M. Siegel, Attorney-in-02/15/2024

Fact

** 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).

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.