FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549

omb Approval

OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* Adams Kendra				2. Issuer Name and Ticker or Trading Symbol C4 Therapeutics, Inc. [CCCC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) C/O C4 THERAPEUTICS, INC.				3. Date of Earliest Transaction (Month/Day/Year) 09/18/2024									V						
(Street) WATERTOWN MA 02472 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year) tive Securities Acquired, Disposed of, or Benef								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
1. Title of Security (Instr. 3)			2. Transac Date (Month/Da	2A. I Exec if an	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed C			es Acqu	ired (A	3) or 5. Amo 4 and Securi Benefi Owned		unt of ties cially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
			09/18/2024					Code $F^{(1)}$	v	Amount (A) or (D)		F	rice \$6.38	Reported Transaction(s) (Instr. 3 and 4)		D		(Instr. 4)	
1. Title of Derivative Security (Instr. 3)	2. Conversior or Exercise Price of	3. Transaction	3A. Dee Execution	(e.g., pı		alls, v	5. Nu of Deriv Secu	ants, imber vative irities	option	1S, C Exerci		7. Title Amou Secur Under	e and nt of ities	8. F Der Sed	Owner	9. Number derivative Securities Beneficiall	ly	10. Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownershi
	Derivative Security					Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					Derivative Security (Ins 3 and 4)		ınt		Owned Following Reported Transactio (Instr. 4)	-	or Indirect (I) (Instr. 4)	(Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Numb of Share						

Explanation of Responses:

1. Represents shares withheld by the Issuer to satisfy tax withholding obligations in connection with the vesting and settlement of restricted stock units and does not represent a sale by the Reporting Person.

Remarks:

/s/ Shagha Russell, Attorneyin-Fact

** Signature of Reporting Person Date

09/20/2024

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.