FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	ge burden								
hours per respon	ise: 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

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Name and Address of Reporting Person* Catinazzo Thomas					2. Issuer Name and Ticker or Trading Symbol Relay Therapeutics, Inc. [RLAY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) C/O RELAY THERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/15/2021									r (give title) or Vice Pi			. ,		
399 BINNEY STREET, 2ND FLOOR (Street)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
CAMBR			02139											Form	Form filed by More than One Reporting Person				
(City)	(5	-	(Zip)																
		Tab	le I - Nor				curi	ties Ac	quired	, Dis	posed o	of, or Be	neficial	ly Owned	t t				
''' ''' ''			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		, Transaction I Code (Instr. !		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Benefic	es ially Following	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) o (D)	r Price	Transac (Instr. 3	ction(s)			(111511.4)	
Common Stock			11/15	5/202	/2021			M ⁽¹⁾		22,50	0 A	\$4.1	2 37,	37,784 ⁽²⁾		D			
Common Stock 1			11/15	5/2021			S ⁽¹⁾		22,50	0 D	\$35.4	.(3) 15,	15,284 ⁽²⁾		D				
		-	Table II -								osed of, convertil			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) if	if any	execution Date, f any	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		9	7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ot (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to	\$4.12	11/15/2021			M ⁽¹⁾			22,500	(4)		04/09/2028	Common Stock	22,500	\$0.00	39,54	3	D		

Explanation of Responses:

- 1. The reported transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on December 17, 2020.
- 2. Includes 13,887 shares underlying RSUs.
- 3. This transaction was executed in multiple trades at prices ranging from \$35.00 to \$35.86. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request by the staff of the Securities and Exchange Commission, the Issuer or a security holder of the Issuer, full information regarding the number of shares sold at each respective price within the range set forth in this footnote.
- 4. Twenty-five percent (25%) of the shares underlying this option vested on April 9, 2019 and the remainder shall vest in equal quarterly installments over the remaining thirty-six (36) months, subject to the reporting person's continued employment through each vesting date.

Remarks:

/s/ Brian Adams, as Attorneyin-Fact ** Signature of Reporting Person

11/16/2021

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.