FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
· · ac · g.co. · ,		

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average b	ourden								
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

					- 0.	0000	011 00	(11) 01 1110			лпрапу А	. 01 10									
Name and Address of Reporting Person* Bergstrom Donald A					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							
											_	v Offic	er (give title		Other (s	· I					
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 03/24/2022									President, R&D					
C/O RELAY THERAPEUTICS, INC.						124/2	.022									1 Testa	ont, it	œБ			
399 BINNEY STREET, 2ND FLOOR																					
(9)							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CAMBR	IDGE N	ſΑ	02139												X Forr	n filed by On	e Repo	orting Perso	n		
	IDOL IV		02137													n filed by Mo	re thar	n One Repo	rting		
(City)	(5	State)	(Zip)																		
		Tab	le I - Nor	n-Deriv	/ativ	e Se	curi	ies Ac	quire	l, Di	sposed	of, c	r Ber	neficia	ly Own	ed					
			2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.		n Dispos				d Secur Benef Owne	cially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Cod	e v	Amou	it	(A) or (D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Stock				03/24	4/2022				M ⁽¹)	10,0	000	A	\$4.1	2 10	104,926(2)		D			
Common Stock 03/			03/2	4/2022		S ⁽¹⁾		10,0	000	D	\$30) 9.	·,926 ⁽²⁾		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 (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)				Date,	ate, Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			of S Un De	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
]									Amount or							
									Date		Expiration			Number of							
					Code	٧	(A)	(D)	Exercis	able	Date	Titl	е	Shares							
Stock Option (Right to Buy)	\$4.12	03/24/2022			M ⁽¹⁾			10,000	(3)		04/09/202		mmon tock	10,000	\$0.00	217,4	56	D			

Explanation of Responses:

- 1. The reported transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on January 7, 2022.
- 2. Includes 93,387 shares underlying restricted stock units.
- 3. Twenty-five percent (25%) of the shares underlying this option vested on April 2, 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 Attorney-

03/28/2022

in-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.