SEC For	rm 4																	
FORM 4			UNITED STATES SECURITIES AND EXCHANGE COMM Washington, D.C. 20549											SION OMB APPROVAL				VAL
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).			STATEMENT OF CHANGES IN BENEFICIAL OWNE Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940											IP	Estim	Number: ated ave per resp	rage burder	3235-0287 0.5
1. Name and Address of Reporting Person [*] Bergstrom Donald A					2. Issuer Name and Ticker or Trading Symbol <u>Relay Therapeutics</u> , <u>Inc.</u> [RLAY]									k all applica Director	,		n(s) to Issu 10% Ov Other (s below)	vner
	Last) (First) (Middle) C/O RELAY THERAPEUTICS, INC. 399 BINNEY STREET, 2ND FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 12/11/2020								See Remarks				
(Street) CAMBRIDGE MA 02139					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date				2. Transad	action 2A. Deemed Execution Date,		3. Transaction Code (Instr.		ties Acquired (A) or d Of (D) (Instr. 3, 4 and 5 (A) or (D) Price		(A) or 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form:	Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
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)	ve Conversion Date Execution Date if any		Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Ex Expiration (Month/Da		Securities Under Derivative Securi (Instr. 3 and 4)		nderlying curity 4)	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followir Reporte Transac	ee Ownersh Es Form: ally Direct (D or Indirec (I) (Instr. d tion(s)		Beneficial Ownership t (Instr. 4)		
1					1		1				1	A	mount or	1	(Instr. 4))		

Explanation of Responses:

\$5.22

1. On March 2, 2020, the reporting person was granted an option to purchase 126,727 shares of common stock, subject to determination by the Board of Directors of the Issuer (the "Board") that the Issuer has met, in whole or in part, certain milestones (the "2020 Option Grant Criteria"). On June 23, 2020, the Board determined that the 2020 Option Grant Criteria related to 25% of the option had been achieved, and the shares underlying 25% of this option, or 31,682 shares, commenced vesting in sixteen (16) equal quarterly installments following September 23, 2020. On December 11, 2020, the Board determined that the 2020 Option Grant Criteria related to the remaining 75% of the option had been achieved. The shares underlying 75% of this option, or 95,045 shares, shall vest in sixteen (16) equal quarterly installments following March 11, 2021. Vesting of this option is subject to the reporting person's continued employment through each applicable vesting date.

Date

Exercisable

(1)

(D)

Remarks:

Stock Option (Right to

Buy)

Executive Vice President, Head of Research and Development

12/11/2020

/s/ Brian Adams, as Attorney-in-12/15/2020

<u>Fact</u>

Expiration Date

03/01/2030

Title

Commo Stock

** Signature of Reporting Person Date

Number of

126,727(1)

\$0.00

126,727⁽¹⁾

D

Shares

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).

Code v

A

(A)

126,727⁽¹⁾

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.