FORM 4

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287					
Estimated average burden						
hours per response	: 0.5					

Instruction 1(b	ay continue. See	F	Filed pursuant to Section 16(a) of the Securities Exchange Act of 193	L h	hours per response: 0.5		
			or Section 30(h) of the Investment Company Act of 1940				
1. Name and Address of Reporting Person [*] <u>Templeman Thomas</u> (Last) (First) (Middle) C/O CENTESSA PHARMACEUTICALS PLC 3RD FL., 1 ASHLEY RD, ALTRINCHAM		g Person [*]	2. Issuer Name and Ticker or Trading Symbol <u>Centessa Pharmaceuticals plc</u> [CNTA]		ionship of Rep all applicable) Director Officer (give t	title C	10% Owner Other (specify
		CEUTICALS PLC	3. Date of Earliest Transaction (Month/Day/Year) 09/30/2022		below) Chief Teo	t chnology Of	below) fficer
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individ Line)		Group Filing (Cl	heck Applicable
CHESHIRE	X0	WA14 2DT			,	More than On	•
(City)	(State)	(Zip)					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Ordinary Shares ⁽¹⁾	09/30/2022		S ⁽²⁾		2,003	D	\$4.0674 ⁽³⁾	138,247	D	
Ordinary Shares ⁽¹⁾	10/03/2022		S ⁽²⁾		2,455	D	\$ 3.9501 ⁽⁴⁾	135,792	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		iration Date Amount of			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The Ordinary Shares may be represented by American Depositary Shares, each of which currently represents one Ordinary Share.

2. The sales reported represent the number of shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of restricted share units and do not represent discretionary trades by the Reporting Person.

3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$3.93 to \$4.255, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.

4. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$3.765 to \$4.0499, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.

Remarks:

/s/ Gregory Weinhoff,	
attorney-in-fact	

** Signature of Reporting Person Date

10/04/2022

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.