FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	DC	20549	
vasiiiigton,	D.C.	20549	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     HUSSAIN IQBAL J						2. Issuer Name and Ticker or Trading Symbol  Centessa Pharmaceuticals plc [ CNTA ]							(Che	ck all applica	tionship of Reporting all applicable) Director Officer (give title		on(s) to Issu 10% Ov Other (s	vner	
	ast) (First) (Middle) O CENTESSA PHARMACEUTICALS PLC RD FL., 1 ASHLEY RD, ALTRINCHAM					3. Date of Earliest Transaction (Month/Day/Year) 02/01/2023								_ X	below)				,,
(Street) CHESHI (City)		O ctate)	WA14 2DT	Γ	_	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Ind Line)	dividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. To Date		2. Trar Date	nsactio			ed Date,	3. Transaction Code (Instr.		4. Securities Acquired (A)			(A) or	5. Amoun	s lly ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(	(A) or (D)	Price	Transacti	Transaction(s) (Instr. 3 and 4)				
Ordinary Shares <sup>(1)</sup> 02				02/0	01/20	/2023			A		67,100	<b>)</b> (2)	A	\$0	214,659			D	
Ordinary Shares <sup>(1)</sup>													5,500				By spouse		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security  1. Title of Derivative Security  1. Title of Derivative Security  2. Conversion Date (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year)		ate,	4. Transa Code (I 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Ex Expiration (Month/Da	Date		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V (A) (D) Exercisable Date Expiration Date Title of Shares					on(s)											
Share Option (right to buy)	\$3.85	02/01/2023			A		100,000		(3)	0	2/01/2033	Ordina Shares		00,000	\$0	100,00	00	D	

## **Explanation of Responses:**

- 1. The Ordinary Shares may be represented by American Depositary Shares, each of which currently represents one Ordinary Share.
- 2. The shares reported in this transaction represent Restricted Share Units ("RSUs") issued under the Centessa Pharmaceuticals plc Amended and Restated 2021 Stock Option and Incentive Plan. Each RSU represents the contingent right to receive one Ordinary Share of the Issuer. The RSUs shall vest and be settled in four equal annual installments with the first such annual vesting being on February 1, 2024.
- 3. 1/48th of the shares subject to such option shall vest and become exercisable in equal monthly installments with the first installment vesting on March 1, 2023.

## Remarks:

/s/ Gregory Weinhoff, attorneyin-fact

02/03/2023

\*\* 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.