Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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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* Stuckley Carol				<u>Ce</u>	2. Issuer Name and Ticker or Trading Symbol Centessa Pharmaceuticals plc [CNTA]							(Che	eck all applic	ionship of Reporting all applicable) Director		on(s) to Issi 10% Ov		
(Last)	`	,	(Middle)	7		3. Date of Earliest Transaction (Month/Day/Year) 06/25/2024								Officer (give title below)		Other (s below)	pecify	
C/O CENTESSA PHARMACEUTICALS PLC 3RD FLOOR, 1 ASHLEY RD, ALTRINCHAM ———————————————————————————————————				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting							
(Street) CHESHI	RE X	0	WA14 2D	Γ	R	ıle '	10h5-1	1(c)	Transa	acti	on Indi	ication		Persor		e tnan	One Repor	ting
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,			, Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 ar		5. Amou Securitie Benefici Owned F Reported	es ally Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3	tion(s)			(111001. 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		expiration Date	Title	Amount or Number of Shares					
Share Option (right to buy)	\$8.89	06/25/2024			A		48,000		(1)	0	06/25/2034	Ordinary Shares ⁽²⁾	48,000	\$0	48,000)	D	

Explanation of Responses:

- 1. The shares subject to such option will vest in full on the earlier of (i) the first anniversary of the grant date or (ii) the Issuer's next annual meeting of shareholders, subject to continued service as a director through the applicable vesting date.
- 2. The Ordinary Shares may be represented by American Depositary Shares, each of which currently represents one Ordinary Share.

Remarks:

/s/ Gregory Weinhoff, attorneyin-fact 06/27/2024

** 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.