FORM 4

Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

1. Name and Address of Reporting Person*  Bunker Kevin D.  (Last) (First) (Middle)  C/O ZENTALIS PHARMACEUTICALS, INC. 530 SEVENTH AVENUE, SUITE 2201  (Street)  NEW YORK NY 10018						Issuer Name and Ticker or Trading Symbol Zentalis Pharmaceuticals, Inc. [ ZNTL ]      Date of Earliest Transaction (Month/Day/Year) 06/01/2021  4. If Amendment, Date of Original Filed (Month/Day/Year)									(Check	Chief Operating Officer  6. Individual or Joint/Group Filing (Check Applicable ine)				wner specify pplicable
(City)			Zip)												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. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Benefic Owned		ties cially I Following	Forr (D) ( Indi	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership	
						Code	· v	Aı	Amount (A) or Price		Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)			
Common Stock 06				06/01/202	21				S <sup>(1)</sup>			7,571	D	\$54.0044 <sup>(2)</sup>		34,529				See Footnote
Common Stock				06/01/2021					S <sup>(1)</sup>			849	D	\$54.858(3)		33,680				See Footnote
Common Stock																1,0	19,653		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)						Transaction Code (Instr.		mbe rative rities ired r osed ) :. 3, 4	e (M	Date Ex opiration onth/Da	n Da		Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Price of erivative ecurity 1str. 5)	9. Number of derivative Securities Seneficially Owned Following Reported Transactior (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	e V	(D)	Date Exercisab		ole	Expiration Date	Title	or Numb of Share							

## Explanation of Responses:

- 1. The sale reported in the Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on September 21, 2020.
- 2. The price reported is a weighted average price. The shares were sold in multiple transactions at per share prices ranging from \$53.54 to \$54.47. The Reporting Person undertakes to provide upon request to the SEC staff, the Issuer, or any stockholder of the Issuer, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. The price reported is a weighted average price. The shares were sold in multiple transactions at per share prices ranging from \$54.59 to \$55.02. The Reporting Person undertakes to provide upon request to the SEC staff, the Issuer, or any stockholder of the Issuer, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

## Remarks:

By: /s/ Melissa B. Epperly, Attorney-in-Fact for Kevin D. 06/02/2021 **Bunker** 

\*\* 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.