FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB APPROVAL										
OMB Number:	3235-0287									
Estimated averag	e burden									

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

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(c). S	ee Instruction 1	0.																	
1. Name and Address of Reporting Person* Myers Scott Dunseth					2. Issuer Name and Ticker or Trading Symbol Zentalis Pharmaceuticals, Inc. [ZNTL]							Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>Myers Scott Dunseur</u>											_	_		8	Direct	tor		10% Ov	vner
(Last) (First) (Middle) C/O ZENTALIS PHARMACEUTICALS, INC. 10275 SCIENCE CENTER DRIVE, SUITE 200						3. Date of Earliest Transaction (Month/Day/Year) 11/13/2024								Officer (give title Other below) below)					specify
10273 50	CIENCE CI	ENTER DRIVE,	50111	3 200	4. If A	mend	ment, D	Date o	f Origina	al File	d (Month/Da	y/Year	r)			Joint/Grou	o Filin	ng (Check A	pplicable
(Street) SAN DII														Line	Form	filed by On- filed by Mo on		Ū	
(City)	(St	ate) (2	Zip)																
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or I	Bene	ficial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			, 4 and Secu Bene		rities I ficially ed Following (n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	v	Amount (A)) or	Price	Transa	action(s) 3 and 4)			(111501. 4)		
Common Stock 11/13/2					024				A		260,1920	1)	A	\$ <mark>0</mark>	26	0,192		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)	Derivative Conversion Date Execution Date Security or Exercise (Month/Day/Year) if any			ion Date,	4. 5. Number of Code (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative ities red sed 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		str.	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)	
													or Numl						

Explanation of Responses:

1. The restricted stock units ("RSUs") were granted by the Issuer pursuant to the Issuer's Non-Employee Director Compensation Program. One third of the RSUs will vest on each of the first, second and third anniversaries of the grant date, subject to the reporting person's continued service with the Issuer on each vesting date.

Exercisable

Date

(D)

Remarks:

/s/ Andrea Paul, attorney-infact for Scott Myers

or Shares

11/13/2024

** 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).

Code V

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.