FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

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ton, D.C. 20549				

OMB APP	ROVAL
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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 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Collins Helen Louise						2. Issuer Name and Ticker or Trading Symbol Enliven Therapeutics, Inc. [ELVN]							(Ct	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) C/O ENLIVEN THERAPEUTICS, INC. 6200 LOOKOUT ROAD						3. Date of Earliest Transaction (Month/Day/Year) 10/18/2024								Officer (give title Other (specify below) CHIEF MEDICAL OFFICER					
(Street) BOULD	ER C	0	80301 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	e) Form	or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting rson				
,	`	•		on-Deriv	vative	Sec	uritie	es Ac	auired	l. Di	isposed (of, or Be	eneficia	lly Owne	d				
1. Title of Security (Instr. 3) 2. Trans Date			2. Transac	tion	ion 2A. Deemed Execution D		2A. Deemed 3. Execution Date, Trans		Transaction Disposed Of (D) (Instr. 3, 4 a Code (Instr.		i (A) or	5. Amo Securit Benefic Owned	unt of ies ially Following	Form: D (D) or In	rm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 10/18/20				2024				M ⁽¹⁾		816	A	\$2.48		816	Г				
Common Stock 10/18/20			2024	24 S ⁽¹⁾ 816 D \$30.0		\$30.003	3 ⁽²⁾ 0		D										
		Т	able II								posed of converti			/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Executi if any	Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number		6. Date Exercisable Expiration Date (Month/Day/Year)		e Amount of		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly Di or (I)	wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares							
Stock Option (right to buy)	\$2.48	10/18/2024			M ⁽¹⁾			816	(3)		06/17/2031	Common Stock	816	\$0	266,26	8	D		

Explanation of Responses:

- 1. The option exercise and sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on October 19, 2023.
- 2. This transaction was executed in multiple trades at prices ranging from \$30.00 to \$30.03. The price reported above reflects the weighted average sale price. The Reporting Person undertakes to provide upon request by the staff of the Securities and Exchange Commission, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate sale price.
- 3. The option, originally for 287,084 shares, vested as to one-fourth of the shares on June 17, 2022, and the remainder vest in 36 equal monthly installments thereafter

/s/ Ben Hohl, by power of 10/22/2024 attorney

** 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.