FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington.	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

1. Name and Address of Reporting Person* <u>Hohl Benjamin</u>				2. Issuer Name and Ticker or Trading Symbol Enliven Therapeutics, Inc. [ELVN]					(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify						
(Last)	`	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/13/2024					X	below) CHIEF	´				
		ERAPEUTICS, I	NC.	-	4. If Amendment, Date of Original Filed (Month/Day/Year)					6 Inc	6. Individual or Joint/Group Filing (Check Applicable					
6200 LOOKOUT ROAD				4.	4. If Amendment, Date of Original Filed (Month/Day/Tear)						Line)					
(Street)				_) J	Form fil	ed by One I	Reporti	ing Person	
BOULD	ER C	0	80301								Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)	_ R	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.								satisfy			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			e	Execution Date		Code (Instr.			5. Amoun Securities Beneficia Owned Fo	s Form ally (D) o ollowing (I) (In		Direct Ir ndirect B rr. 4) O	7. Nature of Indirect Beneficial Ownership			
								Code	Amount	(A) o (D)	r Price	Transaction (Instr. 3 and	ion(s)			nstr. 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. Transa Code (8)		Derivative		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 of derivative Securities Beneficially Owned Following Reported Transaction(s)	y [C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Stock Option (right to buy)	\$14.85	02/13/2024		A		185,000		(1)	02/12/2034	Common Stock	185,000	\$0	185,000)	D	

Explanation of Responses:

1. 1/4th of the shares subject to the option will vest on February 13, 2025 and 1/48th of the shares subject to the option will vest each month thereafter, subject to the Reporting Person continuing as a service provider through each such date.

/s/ Benjamin Hohl

02/15/2024

** 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.