FORM 4

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

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, [	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response	. 0.5							

	tion 1(b).	140. 500		Filed							ies Exchanç mpany Act o		1934		nours	s per response:	0.5
Name and Address of Reporting Person*     Jones Jeffrey Alan				2. Issuer Name <b>and</b> Ticker or Trading Symbol Cullinan Oncology, Inc. [ CGEM ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) C/O CULLINAN ONCOLOGY, INC.					3. Date of Earliest Transaction (Month/Day/Year) 03/20/2023							X belo	,	other below dical Officer	(specify )		
ONE MAIN STREET, SUITE 1350				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(Street) CAMBR	IDGE M	A 0	2142												n filed by Mo	ore than One Re	
(City)	(St	(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 - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	f, or Be	nefici	ally Ow	ned		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Date		Date,	3. Transaction Code (Instr. 8)					nd Secur Benef Owne	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(111341. 4)
Common	Stock			03/20/2	2023				S		390(1)	D	\$11.	32 5	9,610	D	
		Tal									osed of, convertib				d		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	ative rities ired osed	6. Date Expirati (Month/	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)

Date

Exercisable

Expiration Date

## **Explanation of Responses:**

1. Sale of shares to cover personal income tax obligations upon vesting of restricted stock units.

## Remarks:

/s/ Jacquelyn Sumer, Attorney-in-Fact

Shares

03/27/2023

\*\* 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.