FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See | STATEMENT OF (|
|---|-------------------|
| Instruction 1(b). | Filed pursuant to |

CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* DiMartino Jorge | | | | | 2. Issuer Name and Ticker or Trading Symbol Kronos Bio, Inc. [KRON] | | | | | | | | | | all app | olicable) ctor | ng Person(s) to I | |)wner |
|--|---|--|------------------------|---|---|---|---|------------|---|-----------|--|------------------------|---|---|--|--------------------------------------|--|--|-------|
| (Last) | (Fi | , | Middl | e) | 3. Date of Earliest Transaction (Month/Day/Year) 01/04/2024 | | | | | | | | X | belov | er (give title v) ef Medica | | Other (s below) icer & VI | | |
| 1300 SO. EL CAMINO REAL, SUITE 400 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) SAN MATEO CA 94402 | | | | | | | | | | | | | X | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (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 | l - l | Non-Deriva | tive | Secui | rities | Ac | quir | ed, Di | sposed of | f, or E | Benefici | ally | Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | Execution (ear) if any | | | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a | | | nd 5) Sec Bei Ow | | Amount of ecurities eneficially wned Following | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock 01/04/ | | | 01/04/202 | 24 | | | | S | | 12,009(1) | D | \$1.183 | .836 ⁽²⁾ 3 | | 315,246 | | D | | |
| | | Та | ble | II - Derivati (e.g., pu | | | | | | | posed of, convertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Exe if ar | Deemed cution Date, ny nth/Day/Year) | | saction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Exp (Mo | oiration I | (Year) | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amoun or Numbe of Title Shares | | t r | | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

- 1. Represents shares sold to satisfy estimated tax withholding obligations upon the settlement of restricted stock units.
- 2. The weighted average sale price for the transaction reported was \$1.1836, and the range of prices were between \$1.12 to \$1.28. Upon request by the SEC staff, the Issuer, or any security holder of the Issuer, full information regarding the number of shares sold at each separate price will be provided.

Remarks:

/s/ Allison Frisbee, Attorney-

01/05/2024

in-Fact

** 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.