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
Instruction 1(b).

## STATEMENT OF 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*     Zinda Michael					2. Issuer Name <b>and</b> Ticker or Trading Symbol Repare Therapeutics Inc. [ RPTX ]								(Check	all app Direc	ionship of Reporting F all applicable) Director Officer (give title below) EVP, Chief Scie		rson(s) to Is 10% Ov Other (s	wner	
	(Last) (First) (Middle) C/O REPARE THERAPEUTICS INC. 7210 FREDERICK-BANTING, SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 08/16/2021								X			below	below)	
(Street)	RENT A8	В Н	H4S 2A1 (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)								vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quired	l, Dis	sposed of	, or B	enefi	cially	Own	ed			
1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/					Execution I		ate,	Code (		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		red (A) o str. 3, 4	and 5) Securi Benefi Owned		ities For icially (D) d Following (I) (		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D) Price		е	Reported Transaction(s) (Instr. 3 and 4)				(111511.4)
Common Stock 08/16/20				021				S <sup>(1)</sup>		14,300	D	\$33	3.97 <sup>(2)</sup>	21,233			D		
Common Stock 08/16/20				021				S <sup>(1)</sup>		700	D	\$34.45(3)		20,533			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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				Transaction Code (Instr.		vative virities vired r osed ) r. 3, 4	Expiration D		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sec (Ins	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code		(A)	(D)	Date Exerci	sable	Expiration Date	Title	Number of Shares						

## **Explanation of Responses:**

- $1. \ The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan previously adopted by the reporting person.$
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$33.37 to \$34.33 inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnotes (2) and (3).
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$34.39 to \$34.50 inclusive.

## Remarks:

/s/ Steve Forte, Attorney-in-

08/20/2021

**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.