FORM 4

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

Washington, D.C. 20549

## 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								
OMB Number:	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

1. Name and Address of Reporting Person* <u>Bonita David P</u>				2. Issuer Name and Ticker or Trading Symbol Repare Therapeutics Inc. [ RPTX ]						(Ch	<ol> <li>Relationship of Reporting Person(s) to Issuer (Check all applicable)</li> <li>Director</li> <li>10% Owner</li> </ol>						
(Last)	`	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/17/2024							Officer below)	(give title	Other ( below)	specify		
C/O REPARE THERAPEUTICS INC.				4. It	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) ST-LAURENT A8 H4S 1Z9													Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)					Rı	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.											
		Tab	le I - Non-	-Deriv	ative	e Se	curities	s Ac	quired, Di	sposed o	of, or Be	neficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Executio			Code (Ins	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			5. Amour Securitie Beneficia Owned F Reported	es Fo ally (D) Following (I)	i. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code V	Amount	(A) or (D)	r Price	Transact (Instr. 3 a	ion(s)		(Instr. 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		3A. Deemed Execution Da if any (Month/Day/\)	ate, T	4. Transacti Code (Ins 8)				6. Date Exerc Expiration Day/N	ate	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 (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$3.8	06/17/2024			A		27,200		(1)	06/16/2034	Common Shares	27,200	\$0	27,200	D		

## **Explanation of Responses:**

1. The option will vest in equal monthly installments over twelve (12) months from the date of grant, subject to Reporting Person continuing to provide service through each such date.

/s/ Steve Forte, Attorney-in-

Fact

\*\* Signature of Reporting Person Date

06/20/2024

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.