SEC Form 4	
FORM	4

Instruction 1(b)

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

Check this box to indicate that a transaction was made pursuant to a

contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5t(c). See Unstructions 10

M 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

r(c). See instru									
1. Name and Address of Reporting Person* Combs Andrew (Last) (First) (Middle) C/O PRELUDE THERAPEUTICS INCORPORATED 175 INNOVATION BOULEVARD		(Middle)	2. Issuer Name and Ticker or Trading Symbol Prelude Therapeutics Inc [PRLD] 3. Date of Earliest Transaction (Month/Day/Year) 12/20/2024		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner ✓ Officer (give title Other (specify below) below) Chief Chemistry Officer				
		D	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line)	vidual or Joint/Group Filing (Check Applicabl				
(Street) WILMINGTON	N DE	19805		V	Form filed by One Rep Form filed by More tha Person	0			
(City)	(State)	(Zip)							
4									

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	12/20/2024		Р		3,075	Α	\$1.15	317,623(1)	D	
Common Stock	12/23/2024		Р		60,000	Α	\$1.3667(2)	377,623	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		Transaction of Code (Instr. 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) (Instr. 4)	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				

Explanation of Responses:

1. The reported total includes 10,106 shares of common stock the reporting person has acquired since the date of his last ownership report through the issuer's Employee Stock Purchase Plan in one or more transactions exempt pursuant to Rules 16b-3(c).

2. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$1.20 to \$1.55, 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 purchased at each separate price within the ranges set forth herein.

Remarks:

/s/ Krishna Vaddi, Attorneyin-Fact

12/26/2024

** 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.