FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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

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* Audia James E						2. Issuer Name and Ticker or Trading Symbol CONSTELLATION PHARMACEUTICALS INC [CNST]									ionship of Reporting F all applicable) Director		g Perso	10% Owner	
(Last)	(Firs	ot) (N	3. Date of Earliest Transaction (Month/Day/Year) 10/22/2019											Officer (give title below)		Other (specify below)			
INC. 215 FIRST STREET, SUITE 200						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) CAMBRIDGE MA 02142														71	Form filed by More than One Reporting Person				
(City)	(Sta	te) (Z	ip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y					Year) if	Execution Date,		te,	3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a					and 5) Secui Bene		cially d Following	Form	nership : Direct · Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
					Code	v	Amount	(A) or (D)	Price		Transa	orted nsaction(s) tr. 3 and 4)			(Instr. 4)				
Common S)19				S ⁽¹⁾		5,012	D	\$15.00	66(2)	66(2) 64,022			D					
Common Stock 10/23/201)19					200	D	\$15.14	.1451(3)		63,822		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)	ative Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any		4. Transac Code (II 8)	(Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired sed 3, 4	Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amoun or Numbe of Title Shares		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		0. bwnership orm: irect (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. These trades were made pursuant to a Rule 10b5-1 trading plan.
- 2. This transaction was executed in multiple trades at prices ranging from \$15.00 to \$15.03. The price reported above reflects the weighted average price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 3. This transaction was executed in multiple trades at prices ranging from \$15.00 to \$15.29. The price reported above reflects the weighted average price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

Remarks:

/s/ Emma Reeve, as Attorneyin-Fact for James E. Audia

10/24/2019

** 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.