FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| Check this box if no longer subject to | |
|--|--|
| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |

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* Alland Leila | | | | | | 2. Issuer Name and Ticker or Trading Symbol PMV Pharmaceuticals, Inc. [PMVP] | | | | | | | | | (Ch | eck all appli Directo | onship of Reporting all applicable) Director Officer (give title | | Person(s) to Issuer 10% Owner Other (speci | | |
|---|--|--|---|-------|---|--|---|-------|------------------|------------------------------------|-------|--------------------|--|----------------|-----------------------|---|---|---------------------|--|--|--|
| | , | ACEUTICALS, | (Middle) INC. | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/07/2021 | | | | | | | | | | below) | | | эрсспу | | |
| (Street) CRANBI | | - | 08512 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Li | | | | | | | | | | e) X Form t Form t | dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | ar) i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | •, | Code (Instr. | | | | | Benefici Owned | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Ī | Code | v | Amount | (A) (D) | or F | Price | Reporte Transac (Instr. 3 | ction(s) | | | (Instr. 4) | |
| Common Stock 09/07/2 | | | | | | 2021 | | | | М | | 3,900 A | | | \$3.9 | 3, | 3,900 | | D | | |
| Common Stock 09/07/2 | | | | | //2021 | 2021 | | | S ⁽¹⁾ | | 3,900 | D \$30 | | \$30.2 | 5 | 0 | | D | | | |
| | | Т | able II - | | | | | | | | | osed of onverti | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | 1. Fransaction Code (Instr. 3) | | | | Ex | Date Exe piration I onth/Day | Date | | 7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Dai Exe | te ercisable | | xpiration ate | Title | or Nu of | nount mber ares | | | | | | |
| Employee Stock Option (right to | \$3.9 | 09/07/2021 | | | M | | | 3,900 | | (2) | 03 | 2/04/2030 | Commo: Stock | 3, | 900 | \$0.00 | 353,950 | 0 | D | | |

Explanation of Responses:

- 1. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on December 30, 2020.
- 2. One-fourth of the shares subject to the option vested on December 3, 2020, and one forty-eighth of the shares subject to the option shall vest each month thereafter.

Remarks:

/s/ Winston Kung, by power of attorney

** Signature of Reporting Person

Date

09/08/2021

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.