FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington	$D \subset 2$	0549	

wasnington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		

OMB Number:	3235-0287
Estimated average b	ourden
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).

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

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

	ee Instruction 1																		
Name and Address of Reporting Person* Miller Mary					2. Issuer Name and Ticker or Trading Symbol <u>Acrivon Therapeutics, Inc.</u> [ACRV]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
												l line	_ Office	er (give title		Other (s	-		
(Last) (First) (Middle) C/O ACRIVON THERAPEUTICS, INC. 480 ARSENAL WAY, SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 11/14/2024									below) Chief Legal Officer					
400 AK	DENAL WA				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable							
(Street) WATERTOWN MA 02472														Line)	Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (Z	<u>Z</u> ip)																
		Table	I - Nor	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficial	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		Date,	3. Transaction Code (Instr. 8) 4. Securitie Disposed O 5)			es Acq Of (D) (uired (/ Instr. 3	A) or s, 4 and	Benefic	ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)		Drice Trans		saction(s) 2. 3 and 4)			(III3ti. 4)	
Common Stock 11/14/2					2024		F ⁽¹⁾		184	D \$		\$7.92	37,941			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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			on Date,		ransaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Numi of Share						

Explanation of Responses:

1. Shares withheld by the Issuer to satisfy the mandatory tax withholding requirement upon vesting of restricted stock units.

/s/ Rasmus Holm-Jorgensen, Attorney-in-Fact

11/18/2024

** 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.