FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b)

Name and Address of Reporting Person* COLES N ANTHONY						2. Issuer Name and Ticker or Trading Symbol Cerevel Therapeutics Holdings, Inc. [CERE							E Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last)	(Last) (First) (Middle) C/O CEREVEL THERAPEUTICS HOLDINGS,					3. Date of Earliest Transaction (Month/Day/Year) 03/04/2024									Officer (give title below)		Other (s below)	pecify
INC. 222 JACOBS STREET, SUITE 200				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person					
(Street) CAMBRIDGE MA 02141				_	Form filed by More than One Reporting Person											ting		
(City) (State) (Zip)					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 - N	on-Deri	vativ	e Sec	curit	ties Ac	quire	d, Di	isposed o	f, or Be	neficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					Execution Date		n Date,	3. 4. Securities Acquire Disposed Of (D) (Inst. 8)					Securitie Benefici Owned I			n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)				
Common Stock 03/04/20				2024	124		M ⁽¹⁾		50,000	A	\$3.5	65	65,638		D			
Common Stock 03/04/20				2024	024		S ⁽¹⁾		50,000	D	\$41.011	2) 15	,638	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)		4. Transa Code (8)				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 derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Ily	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$3.5	03/04/2024			M ⁽¹⁾			50,000	(3)		12/24/2028	Common Stock	50,000	\$0.00	2,352,4	17	D	

Explanation of Responses:

- $1.\ These\ transactions\ were\ effected\ pursuant\ to\ a\ Rule\ 10b5-1\ trading\ plan\ dated\ September\ 18,\ 2023\ adopted\ by\ the\ Reporting\ Person.$
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at per share prices ranging from \$40.81 to \$41.18. 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 sold at each separate price within the range set forth in this footnote.
- 3. The option is fully vested and exercisable.

/s/ Mark Bodenrader, as 03/06/2024 Attorney-in-Fact

** 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.