FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

STATEMENT	OF CHANGE	S IN BENEF	ICIAL OW	/NERSHIP

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).

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

1. Name and Address of Reporting Person* <u>Thompson Travis Alvin</u>				2. Issuer Name and Ticker or Trading Symbol BICYCLE THERAPEUTICS plc [BCYC]								k all app Direc	tionship of Reporting all applicable) Director		10% O	wner			
(Last)	`	rst) (NERAPEUTICS P	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/03/2023							X	below	er (give title v) nief Accou	untin	Other (below) ng Officer	sреспу <u> </u>	
		ORTWAY BUIL			4. If A	Amendi	ment,	Date o	f Origina	l Filed	d (Month/Da	y/Year)		6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	IDGE X) (CB21 60	GS										X		filed by Mo		porting Pers an One Rep	
(City)	(St	ate) (Z	Zip)		$ _{\Box}$	Check th	nis box	to indic	ate that a	a trans	cion Indi action was m ons of Rule 10	ade pur	suant to a			uction or writt	ten pla	an that is inte	nded to
		Table	I - Noi	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	or B	enefic	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,		Date,	Transaction Disposed Code (Instr. 5)		Disposed (ies Acquired (A Of (D) (Instr. 3,			Securit Benefic Owned	Beneficially Dwned Following		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) (D)	or Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Ordinary Shares 10/03			10/03/2	2023				S		54(1)	D	\$2	20(2)	7	,979		D		
		Tal									osed of, o				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, /Day/Year)	4. Transa Code (8)	Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rities ired r osed)	6. Date Expirati (Month/	on Da Day/Y		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying itive ity (Instr	Dei See (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. Represents the number of shares required to be sold to cover the statutory tax withholding obligations in connection with the vesting and settlement of restricted stock units. This sale is mandated by the Reporting Person's award agreement that requires the satisfaction of minimum statutory tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary sale by the Reporting Person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$19.91 to \$20.00 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 sold at each separate price within the range set forth in this footnote.

Remarks:

/s/ Jason Minio, Attorney-in-Fact

10/05/2023

** 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.