FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington, D.C. 20549

STATEMENT	OF CHA	NGES IN	BENEFICIAL	OWNERSHIP
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	OMB APPRO	JVAL
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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* Farid Adrienne						2. Issuer Name and Ticker or Trading Symbol Century Therapeutics, Inc. [IPSC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) C/O CEN	,	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/16/2024								X Officer (give title Other (specify below) Chief Operations Officer					
25 N 38TH STREET, 11TH FLOOR					4. It	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) PHILADELPHIA PA 19104					X Form filed by One Reporting Person Form filed by More than One Reporting Person											I			
(City) (State) (Zip)					¯ Rı	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													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/			tion	on 2A. Deemed		ned 3. n Date, Transaction Code (Instr		tion	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)	Price	Transa	ction(s) 3 and 4)			(111511. 4)		
Common Stock 02/16/2			2024	4		M ⁽¹⁾		485	A	\$1.03	114,634			D					
Common Stock 02/16/20			2024)24			S ⁽¹⁾		485	D	\$4.8624	(2) 11	4,149		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 Date Of Date (Month/Day/Year) 3. Transaction Date Execution Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year)				Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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 Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisal	ole	Expiration Date	Title	Amount or Number of Shares						
Stock Option (right to	\$1.03	02/16/2024			M ⁽¹⁾			485	(3)		07/17/2029	Common Stock	485	\$0	222,17	0	D		

Explanation of Responses:

- 1. The transactions reported herein were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on November 17, 2022.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$4.85 to \$4.865, 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.
- 3. The option is fully vested and exercisable

/s/ Adrienne Farid

02/21/2024

** 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.