FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: 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

1. Name and Address of Reporting Person* <u>Lachey Jennifer</u>						2. Issuer Name and Ticker or Trading Symbol Keros Therapeutics, Inc. [KROS]								heck all a Di	tionship of Reporting all applicable) Director Officer (give title		rson(s) to Iss 10% Ov Other (s	vner
	ROS THER	irst) APEUTICS, INC		DING E	03/	3. Date of Earliest Transaction (Month/Day/Year) 03/11/2022								A be	Chief Scienti		below)	
(Street) LEXING (City)			02421 (Zip)		_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deri 1. Title of Security (Instr. 3) 2. Trans: Date (Month/I					ction	tion 2A. Deer			Transaction Disposed Code (Instr.			es Acquired Of (D) (Insti	d (A) or	5. A 5) Sec Ber Ow	5. Amount of		m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)	Price	Tra	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock (03/11/	2022	T			М	Г	2,650	A	\$0.3	3	88,350		D		
Common	nmon Stock			03/11/	/11/2022				S ⁽¹⁾		1,062	D	\$52.43	3(2)	(2) 87,288		D	
Common Stock			03/11/	/2022				S ⁽¹⁾		713	D	\$53.3	5 (3)	86,575		D		
Common Stock 03/11								S ⁽¹⁾		875	D	\$54.5				D		
		Т	able II								posed of converti			y Own	ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I	n Date,	Code (of		6. Date Exercis Expiration Date (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Pric Deriva Securi (Instr.	y Securi Securi Denefi Owned Follow Repor	tive ties cially I ing ied iction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (right to buy)	\$0.3	03/11/2022			M			2,650	(5)		03/25/2028	Common Stock	2,650	\$0.0	84	,655	D	

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$52.03 to \$53.025 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 ranges set forth in footnotes (2), (3) and (4).
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$53.06 to \$53.83 inclusive.
- 4. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$54.225 to \$55.13 inclusive.
- 5. Immediately exercisable.

Remarks:

/s/ Keith Regnante, Attorney-

03/15/2022

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.