FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	vvaoriington, b.c	J. 20010	
STATEMENT OF C	HANGES IN I	BENEFICIAL (OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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).

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 defense conditions of Rule 10b5-1(c). See Instruction 10.

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* Wilson Michael					2. Issuer Name and Ticker or Trading Symbol CELESTICA INC [CLS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Image: Director 10% Owner					
	ONGE STRI	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/31/2024									Officer below)	(give title		Other (s below)	specify
(Street)		6	M2N 6L7		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting						
(City)			(Zip)		-										Person		e man	Опе кероі	rung
		Tal	ole I - Non	-Deriv	/ativ	e Se	curitie	es Ac	quired,	Dis	posed o	f, or Be	enefic	ially	Owned				
1. Title of Security (Instr. 3)			- 1	Date	saction n/Day/Year)		Execution Date,		Transaction Disposed Code (Instr. 5)		ties Acqui d Of (D) (In	red (A) istr. 3, 4	or and	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	Amount (A) or (D)						ice	(Instr. 4)
Common Shares 12				12/3	1/2024		M		6,697	5,697 A		\$ <mark>0</mark>	17,667			D			
		,	Table II - D								osed of, convertil				Owned				
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/Yes	ate, T	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		te Amount of			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v			Date Exercisa	ıble	Expiration Date	or		ount ober res		(Instr. 4)	лі(ә)		
Restricted Share Units	(1)	12/31/2024			М			2,795	(2)		(2)	Common Shares		95	\$0	0		D	
Restricted Share Units	(1)	12/31/2024			М			2,735	(3)		(3)	Common	n 2,7	35	\$0	2,736		D	
Restricted Share Units	(1)	12/31/2024			M			1,167	(4)		(4)	Common		67	\$0	2,333		D	

Explanation of Responses:

(1)

12/31/2024

Restricted

Units

- 1. Each restricted share unit ("RSU") represents a contingent right to receive one common share or an equivalent value in cash at the holder's election.
- $2. \ On \ December \ 31, 2021, the \ reporting \ person \ was \ granted \ 8,386 \ RSUs, 1/3 \ of \ which \ vest \ annually \ over \ 3 \ years \ on \ the \ anniversary \ of \ the \ grant \ date.$
- $3.\ On\ December\ 31,\ 2022,\ the\ reporting\ person\ was\ granted\ 8,207\ RSUs,\ 1/3\ of\ which\ vest\ annually\ over\ 3\ years\ on\ the\ anniversary\ of\ the\ grant\ date.$
- 4. On December 31, 2023, the reporting person was granted 3,500 RSUs, 1/3 of which vest annually over 3 years on the anniversary of the grant date.
- 5. On December 31, 2024, the reporting person was granted 1,092 RSUs, 1/3 of which vest annually over 3 years on the anniversary of the grant date.

/s/ Tracy Connelly McGilley, attorney-in-fact
** Signature of Reporting Person

1,092

\$0

Commor

Shares

(5)

01/02/2025

Date

1,092

D

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.

1,092

(5)