FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 200

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person\*

RA Capital Healthcare Fund LP

(First)

200 BERKELEY STREET, 18TH FLOOR

MA

(State)

(First)

C/O RA CAPITAL MANAGEMENT, L.P.

1. Name and Address of Reporting  $\operatorname{Person}^*$ 

**Kolchinsky Peter** 

(Middle)

02116

(Zip)

(Middle)

(Last)

(Street)
BOSTON

(Last)

	tion 1(b).	iue. See		Filed										of 1934		L	nours per r	respon	se:	0.5
1 Nome	ad Add=aaa -4	Donorting Days**			or	Secti	ion 30(	h) of tl	ne Inve	stment	Compa	any Act		)	5. Relationshi	n of Re	eportina Pr	erson	s) to Iss	suer
		Reporting Person*  IANAGEME		<u>, L.P.</u>					IMR		ing Syn	ilboi			Check all app Direc	licable	e)		.0% Ow	
(Last) (First) (Middle) 200 BERKELEY STREET, 18TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 12/08/2022									Officer (give title Other (specify below) below)					
(Street)	N M.	A 0	211	6	4. 1	If Am	endme	ent, Da	te of O	riginal	Filed (M	onth/D	ay/Yea			i filed b	Group Fili by One Re by More th	portin	g Perso	n
(City)	(St	ate) (2	Zip)																	
		Table	1 -	Non-Deriva	ative	Se	curit	ies A	cqui	red, I	Dispo	sed o	f, or	Benefic	cially Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye		ar) 2A. Deem Execution if any (Month/Da		ution E	Oate,	3. Transaction Code (Instr. 8)		4. Securities Acq Disposed Of (D) ( 5)		Acquire D) (Inst	d (A) or r. 3, 4 and	5. Amount of Securities Beneficially Owned Following		6. Ownershi Form: Direc (D) or Indirect (I) (Instr. 4)		7. Natu Indired Benefi Owner (Instr.	t cial ship			
								Code	v	Amour		(A) or (D)	Price	Reported Transaction (Instr. 3 and						
Common	Stock			12/08/202	2				P		10,6	500	Α	\$3.75	3,231,42	25 <sup>(1)</sup>	I		See Footr	notes <sup>(1)(4)</sup>
Common	Stock			12/09/202	2				P		19,2	299	A	\$3.93(2)	3,250,72	24 <sup>(3)</sup>	I		See Footr	notes <sup>(3)(4)</sup>
		Tal	ble	II - Derivati (e.g., pu												d				
Security or Exer (Instr. 3) Price o Derivat	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		ion of the str. S	5. Numbe		6. Date Expiration (Month/Date et al.		xercisable and n Date		tle and ount of urities erlying vative urity (Instr d 4)	8. Price of Derivative Security (Instr. 5)	deriva Secu Bene Owne Follog Repo	rities ficially ed wing orted saction(s)	Forn Direct or In	ership n: ct (D) direct nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Cod	e V	. (	A) (I	Da D) Ex	ate xercisal		piration te	Title	Amount or Number of Shares	1					
		Reporting Person*	N TO	D					Í		,									
<u>RA CA</u>	APITAL N	<u>IANAGEME</u>	1N 1	<u>,, L.P.</u>																
(Last) 200 BEF		(First) FREET, 18TH F	LO	(Middle) OR																
(Street) BOSTO	N	MA		02116																
(City)		(State)		(Zip)		_														

200 BERKELI	EY STREET, 18T	H FLOOR								
(Street)										
BOSTON	MA	02116								
(City)	(State)	(Zip)								
	1. Name and Address of Reporting Person*									
Shah Rajeev M.										
(Last)	(First)	(Middle)								
C/O RA CAPITAL MANAGEMENT, L.P.										
200 BERKELI	EY STREET, 18T	H FLOOR								
(Street)										
BOSTON	MA	02116								
(City)	(State)	(Zip)								

## **Explanation of Responses:**

- 1. Held directly by RA Capital Healthcare Fund, L.P. (the "Fund").
- 2. This transaction was executed in multiple trades at prices ranging from \$3.83 to \$3.95; the price reported above reflects the weighted average purchase price. The reporting person hereby undertakes, upon request, to provide full information to the staff of the Securities and Exchange Commission, the Issuer, or a security holder of the Issuer regarding the number of shares and prices at which these transactions, and all other transactions reported in this Form 4, were effected.
- 3. Held directly by the Fund.
- 4. RA Capital Management, L.P. (the "Adviser") is the investment manager for the Fund. The general partner of the Adviser is RA Capital Management GP, LLC (the "Adviser GP"), of which Dr. Peter Kolchinsky and Mr. Rajeev Shah are the managing members. The Adviser, the Adviser GP, Dr. Kolchinsky and Mr. Shah disclaim beneficial ownership of any of the reported securities, except to the extent of their pecuniary interest therein.

/s/ Peter Kolchinsky, Manager
of RA Capital Management,
L.P.
/s/ Peter Kolchinsky, Manager
of RA Capital Healthcare
Fund GP, LLC the General
Partner of RA Capital
Healthcare Fund, L.P.
/s/ Peter Kolchinsky,
individually
/s/ Rajeev Shah, individually
\*\* Signature of Reporting Person

Date

 $Reminder: \ Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly.$ 

- \* 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.