SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB	APPROVAL

OMB Number: 3235-0287 Ectir nated average burden

to Sec obligat	this box if no le tion 16. Form 4 ions may conti tion 1(b).	or Form 5	STATEMEN	NT OF (pursuant to or Section	o Secti	on 16(a)	of the	Securit	ies Exc	hange	Act of 1934		RSHIP		OMB Numb Estimated a hours per re	averag	e burde	235-0287 n 0.5	
1. Name and Address of Reporting Person [*] RA CAPITAL MANAGEMENT, L.P.			2. Issuer Name and Ticker or Trading Symbol IMARA Inc. [IMRA]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner									
(Last) (First) (Middle) 200 BERKELEY STREET, 18TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 01/03/2023								Officer (give title Other (specify below) below)							
(Street) BOSTON MA 02116 (City) (State) (Zip)				4. If Ame	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 X Form filed by More than One Reporting Person						
		Table	I - Non-Deriva	tive Sec	uritie	es Acq	uirec	l, Dis	pose	d of,	or Bene	fici	ally Own	ed					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				(D) (Ins	nstr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amou		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				See		
Common	Stock		01/03/2023			Р			,297	A	\$3.9982						Footnotes ⁽¹⁾⁽³		
		Tal	ble II - Derivati (e.g., pu	ive Secu its, calls										d					
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/Year)	4. Transaction Code (Instr 8)	n of r. De Se Ac (A) Dis of (In	Number rivative curities quired or sposed (D) str. 3, 4 d 5)	Expira	e Exerc ation Da h/Day/Y			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)	str. Derivative deriv Security Security Security (Instr. 5) Benn Own Follo Repr Tran		deriva Secur Benet Owne Follov Repor	curities Form neficially Dire ned or Ir lowing (I) (I ported nsaction(s)		11. Nature of Indirect Beneficial Ownershi (Instr. 4)		
				Code V	(A)	(D)	Date Exerci	isable	Expira Date		Amor or Numl of Title Share	ber							
		f Reporting Person [*] /IANAGEME	<u>ENT, L.P.</u>																
(Last) 200 BEF	RKELEY S	(First) TREET, 18TH F	(Middle) LOOR																
(Street) BOSTO	N	MA	02116																
(City)		(State)	(Zip)																
		f Reporting Person [*] Ithcare Fund I																	
(Last) 200 BEF	RKELEY S	(First) TREET, 18TH F	(Middle) LOOR																
(Street) BOSTO	N	MA	02116																
(City)		(State)	(Zip)																
	nd Address of nsky Pete	f Reporting Person [*] P <u>r</u>																	
		(First) MANAGEMEN FREET, 18TH F																	

(Street) BOSTON	МА	02116						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person [*] Shah Rajeev M.								
(Last)	(First)	(Middle)						
C/O RA CAPITAL MANAGEMENT,								
200 BERKELEY STREET, 18TH FLOOR								
(Street)								
BOSTON	MA	02116						
(City)	(State)	(Zip)						

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$3.67 to \$4.00; 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.

2. Held directly by RA Capital Healthcare Fund, L.P. (the "Fund").

3. 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.

<u>/s/ Peter Kolchinsky, Manager</u> of RA Capital Management, L.P.	<u>01/05/2023</u>
<u>/s/ Peter Kolchinsky, Manager</u> of RA Capital Healthcare <u>Fund GP, LLC the General</u> <u>Partner of RA Capital</u> <u>Healthcare Fund, L.P.</u>	<u>01/05/2023</u>
/s/ Peter Kolchinsky, individually	<u>01/05/2023</u>
<u>/s/ Rajeev Shah, individually</u> ** Signature of Reporting Person	<u>01/05/2023</u> 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.