FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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lashington.	D.C. 2	0549		

OMB APPROVAL											
OMB Number:	3235-0287										
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hours per respense:	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

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1. Name and Address of Reporting Person* GOLDFISCHER CARL				2. Issuer Name and Ticker or Trading Symbol IMARA Inc. [IMRA]									5. Relationship of Rep (Check all applicable) X Director			Reporting Person(s) to Issuer ole) 10% Owner						
(Last)	(Fi	rst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/29/2021										Officer (give title Other (sperbelow) below)							
116 HUNTINGTON AVE, SIXTH FLOOR					4. I											6. Individual or Joint/Group Filing (Check Applicable						
(Street)	N M	A	02116											Lir	Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(Si	tate)	(Zip)																			
		Tab	le I - Non	-Deriv	ative	Se	curitie	s Ac	qu	iired, I	Disp	osed o	of, oı	r Ben	eficia	lly (Owned	I				
1. Title of Security (Instr. 3)			2. Trans Date (Month/I		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Ĺ	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			d (A) or r. 3, 4 an	4 and Securitie Benefici		es ally Following	Form (D) o	n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	v	Amount (A) or (D)		Price		Transaction(s) (Instr. 3 and 4)				(111501.4)		
Common Stock														703,380			I	By entities affiliated with Bay City Capital LLC ⁽¹⁾				
	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 or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transactior Code (Instr 8)		n of		6. Date Exercisal Expiration Date (Month/Day/Year			Amo Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dai	te ercisable		opiration ate	Title		Amount or Number of Shares	1						
Stock Options (Right to	\$8.12	06/29/2021			A		7,728			(2)	06	6/28/2031	Com Sto		7,728		\$0.00	7,728		D		

Explanation of Responses:

1. Represents shares of common stock held by entities affiliated with Bay City Capital, LLC including Bay City Capital Fund V, L.P. and Bay City Capital Fund V Co-Investment Fund, L.P. Bay City Capital Management V LLC ("GP V") is the general partner of Bay City Capital Fund V, L.P. and Bay City Capital Fund V Co-Investment Fund, L.P. (collectively, "BCC V"). Bay City Capital, LLC ("BCC LLC") is the manager of GP V. The Reporting Person is an advisor of BCC LLC and a member of GP V and and shares voting and dispositive power with respect to shares held by BCC V. The Reporting Person disclaims beneficial ownership of these shares, except to the extent of any pecuniary interest therein.

2. The option will vest on the first anniversary of the date of grant or, if earlier, the date of Imara's next annual meeting of stockholders following the date of grant.

Remarks:

/s/ Michael P. Gray, Attorneyin-Fact

06/30/2021

** 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.