SEC Form 4

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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL								
OMB Number:		3235-028						

6 Estimated average burden

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 [*] Peyer James			2. Issuer Name and Ticker or Trading Symbol Sensei Biotherapeutics, Inc. [SNSE]		all applicable Director	le)	Perso X	n(s) to Issuer 10% Owner			
	(First) IOTHERAPEUT	· · · · · · · · · · · · · · · · · · ·	3. Date of Earliest Transaction (Month/Day/Year) 12/29/2021		Officer (giv below)	<i>le</i> title		Other (specify below)	lecity		
1405 KESEAK	CH BLVD. SUIT	E 125	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individ Line)	dual or Join	t/Group F	=iling ((Check Applicab	le		
(Street)				X	Form filed	by One F	Report	ting Person			
ROCKVILLE	MD	20850			Form filed Person	by More	than (One Reporting			
(City)	(State)	(Zip)									

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Disposed Of 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	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	12/29/2021		Р		69,000	A	\$4.98 ⁽¹⁾	4,918,286	I ⁽²⁾	See footnote ⁽²⁾

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The price reported is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$4.75 to \$5.25, 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 purchased at each separate price within the ranges set herein.

2. These shares are held by Cambrian Biopharma Inc, a Delaware corporation ("Cambrian"). The Reporting Person is the Chief Executive Officer of Cambrian and in such capacity may direct the voting and disposition of the shares held by Cambrian, subject in certain instances to the approval of Cambrian's Board of Directors. Mr. Peyer disclaims beneficial ownership of such shares.

<u>/s/ Erin Hoffert, Attorney-in-</u>	12/30/2021
<u>Fact</u>	12/00/2021
** 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.