FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden

0.5

hours per response:

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Peyer James					2. Issuer Name and Ticker or Trading Symbol Sensei Biotherapeutics, Inc. [SNSE]								Check all ap	ector	2	10%	Owner	
(Last) (First) (Middle) C/O SENSEI BIOTHERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 03/23/2021									Offi belo	cer (give titl ow)	le	Othe belov	r (specify v)
1405 RE	SEARCH	BLVD. SUITE 1	25		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) ROCKVILLE MD 20850					03/24/2021								X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(\$	State) (2	(Zip)															
		Table) I - N	lon-Deriva	tive	Secur	rities	Ac	quire	ed, Di	isposed o	f, or E	Benefici	ially Ow	ned			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution Date		·,	Transaction D Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5) Securi Benefi	cially I Following	es Form ally (D) o Following (I) (In		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transa	ction(s) 3 and 4)			(11150.4)
Common Stock 03/23/202				21				P 9,500 ⁽¹⁾		A	\$14.34	4(2) 4,798,293			I ⁽³⁾	See footnote ⁽³⁾		
		Та	ble I	I - Derivati (e.g., pu							posed of, convertib				ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Exec if an	Deemed cution Date, y nth/Day/Year)	4. Transaction Code (Instr. 8) 5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5)		ative rities ired sed	Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5) Security (Instr. 5) Reporter Transaci (Instr. 4)		Ownersh Form: Direct (D) or Indirect (I) (Instr. of tion(s)		Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. This Form 4 is being amended to correct the number of shares purchased. The original Form 4 filed on March 24, 2021, overstated the number of shares purchased.
- 2. The price reported is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$14.00 to \$14.75, 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.
- 3. 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.

/s/ Sarah Field, Attorney-in-

04/21/2022

Fact

** 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.