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

I

OMB Number:	mber: 3235-0287						
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obligations ma Instruction 1(h	ay continue. See o).		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	1		hours p	er resp	onse:	0.
			or Section 30(h) of the Investment Company Act of 1940						
1. Name and Address of Reporting Person <sup>*</sup> Cambrian BioPharma Inc			2. Issuer Name <b>and</b> Ticker or Trading Symbol Sensei Biotherapeutics, Inc. [SNSE]		tionship of R all applicable	Reporting Person(s) to Issuer ble)			
	DIOPIIdIIIId	<u>uic</u>	<u></u>		Director		Х	10% Owner	
,				-	Officer (give title	Other (speci	er er cify icable		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		below)			below)	
19 MORRIS A	<b>WENUE</b>		04/19/2021						
BROOKLYN	NAVY YARE	). BUILDING 128		ļ					
	19 MORRIS AVENUE BROOKLYN NAVY YARD, BUILDING 128	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Appl Line)				able		
(Street)				X	Form filed	by One	Repor	ting Person	
BROOKLYN	NY	11205			Form filed Person	by More	than (	One Reportin	g
(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)	Code (		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5			Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	04/19/2021		Р		1,965	Α	<b>\$13.38</b> <sup>(1)</sup>	4,811,509	<b>D</b> <sup>(2)</sup>	

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 5. Numbei 1. Title of Derivative 3A. Deemed Execution Date, 6. Date Exercisable and Expiration Date 7. Title and Amount of 8. Price of Derivative 9. Number of derivative 11. Nature of Indirect 3. Transaction 10. Ownership Conversion Date Transaction (Month/Dav/Year) Derivative Security or Exercise if any (Month/Day/Year) Code (Instr. (Month/Day/Year) Securities Security Securities Form: Beneficial Price of Derivative Securities Acquired (Instr. 3) 8) Underlying (Instr. 5) Beneficially Direct (D) Ownership (Instr. 4) or Indirect Derivative Owned Following Security (A) or Disposed Security (Instr. 3 and 4) (I) (Instr. 4) Reported of (D) (Instr. 3, 4 and 5) Transaction(s) (Instr. 4) Amount or Number Expiration Date of Shares v Code (A) (D) Exercisable Title Date

### Explanation of Responses:

1. The price reported is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$13.00 to \$13.75, 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.

2. These shares are held by Cambrian Biopharma Inc, a Delaware corporation ("Cambrian"). The Chief Executive Officer of Cambrian, James Peyer, 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>Cambrian BioPharma Inc, by:</u>

<u>/s/ James Peyer</u>

\*\* Signature of Reporting Person Date

04/20/2021

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.