FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasiiiigton,	D.C.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
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- 1	hours per response:	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

1. Name and Address of Reporting Person* Hill Emily Luisa						2. Issuer Name and Ticker or Trading Symbol Replimune Group, Inc. [REPL]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	,	irst) GROUP, INC.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024								X	below)		Other (s below) ncial Officer		pecify	
500 UNICORN PARK DRIVE, SUITE 303					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	LN M	ÍΑ	01801											X		led by More		rting Persor One Repor		
(City) (State) (Zip)							Rule 10b5-1(c) Transaction Indication													
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												to								
		Tab	ole I - Nor	n-Deriv	ative	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	nefi	cially	Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,			Code (I	Transaction Code (Instr. 5) Disposed Of (D) (Instr. 3,		4 and Securi Benefi Owned		s ally following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	(A) or (D) Pr		Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock 04/01/					1/202	2024 A 26,665 ⁽¹⁾ A \$0		109	109,995		D									
		-	Table II -						uired, D , option						Owned					
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)		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 (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Num of Sha	nber						
Employee Stock Option (right to buy)	\$7.73	04/01/2024			Α		80,000		(2)	0	14/01/2034	Common Stock	80,	000	\$0	80,000		D		

- 1. Represents shares of the Issuer's common stock issuable upon settlement of restricted stock units ("RSUs") granted to the Reporting Person. Each RSU represents a contingent right to receive one share of the Issuer's common stock. 25% of the RSUs will vest on May 15, 2025 and the remainder will vest in three approximately equal annual installments thereafter until May 15, 2028, subject to the Reporting Person's continuous service to the Issuer.
- 2. 25% of the shares underlying this stock option vest on April 1, 2025, and the remainder of the shares underlying this stock option vest in 36 approximately equal monthly installments thereafter.

/s/ Shawn Glidden, attorney-in-04/03/2024

** 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.