SEC Form 4
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# FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

X Director

OMB Number: 3235-028							
Estimated average burden							
hours per response:	0.5						

X 10% Owner

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

1. Name and Address of Reporting Person\*

Omega Fund IV, L.P.

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

2. Issuer Name and Ticker or Trading Symbol

Replimune Group, Inc. [ REPL ]

																		1		,
(Last) 888 BO	(Fi YLSTON S		Middl	e)	3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below)   01/14/2021 01/14/2021 Officer (give title below) Other (specify below)															
			4. If <i>i</i>					If Amendment, Date of Original Filed (Month/Day/Year)									r Joint/Grou	ıp Fili	ng (Check A	Applicable
(Street) BOSTO	N M	A (	)219	9										Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person						
(City)	(St	ate) (A	Zip)													FCISC	511			
		Table	- I - I	Non-Deriva	tive	Sec	uritie	s Ac	cquire	ed, D	ispos	ed o	of, or I	Benef	icially	v Own	ed			
1. Title of Security (Instr. 3) 2. Transa Date				2. Transaction Date (Month/Day/Y	ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			nd 5)	Securi Benefi Owned	. Amount of Securities Seneficially Dwned Following Reported		Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amou	nt	(A) or (D)	Price		Transa	action(s) 3 and 4)			(11511-4)
Common	Stock			01/14/202	21				<b>S</b> <sup>(1)</sup>		17,6	64	D	\$45.0	) <mark>9</mark> (1)(2)	5,3	5,327,307		<b>D</b> <sup>(4)</sup>	
Common	Stock			01/15/202	21				<b>S</b> <sup>(1)</sup>		1,9	16	D	\$45.	19 <sup>(1)(3)</sup>	5,3	325,391		<b>D</b> <sup>(4)</sup>	
		Та	ble	II - Derivati												Owne	d			
				(e.g., pı	-	alls	-				-				-					<u></u>
1. Title of Derivative Security (Instr. 3) 2. Conversi or Exerci Price of Derivativ Security		ise (Month/Day/Year)		Deemed coution Date, ny onth/Day/Year)	4. Transaction Code (Instr. 8)		n of r. Deri Sec Acq (A) Disp of (I (Ins	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/Da				le and unt of rities erlying vative rity (Ins 1 4)	Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date	e rcisab		iration	Title	Amou or Numb of Share	er					
	nd Address o <u>Fund IV</u>	f Reporting Person <sup>*</sup> , <u>L.P.</u>	r											-					-	·
(Last) 888 BOY	YLSTON S	(First) TREET		(Middle)		_														
(Street) BOSTO	N	MA		02199		_														
(City)		(State)		(Zip)																
	nd Address o Fund IV	f Reporting Person <sup>*</sup> GP, L.P.	e																	
(Last) 888 BOY	YLSTON S	(First) TREET		(Middle)																
(Street) BOSTO	N	MA		02199																
(City)		(State)		(Zip)																
		f Reporting Person' G.P. Manage		<u>.td.</u>																
(Last) 888 BOY	YLSTON S	(First) TREET		(Middle)																
(Street)						-														

BOSTON	MA	02199
(City)	(State)	(Zip)
1. Name and Addr	ress of Reporting Pe <u>a Otello</u>	rson*
(Last) 888 BOYLST(	(First) DN STREET, SU	(Middle) ITE 1111
(Street) BOSTON	MA	02199
(City)	(State)	(Zip)

#### Explanation of Responses:

1. Shares were sold pursuant to a Rule 10b5-1 trading plan.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$44.90 to \$45.68 inclusive. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$44.90 to \$45.65 inclusive. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

4. The reported securities are held directly by Omega Fund IV, L.P. ("Omega IV"). The reported securities may be deemed to be beneficially owned by each of Omega Fund IV GP, L.P. ("Omega IV GP"), as the general partner of Omega IV, and Omega Fund IV GP Manager. Ltd. ("Omega IV GP Manager"), as the general partner of Omega IV GP. Otello Stampacchia and Anne-Mari Paster are all the shareholders and directors of Omega IV GP Manager and have shared voting and investment power over the shares held by Omega IV. Each of Omega IV GP, Omega Fund IV GP Manager and the Omega Directors disclaims beneficial ownership of the securities reported herein, except to the extent of its or their pecuniary interest therein, if any. Otello Stampacchia is a director of the issuer.

### **Remarks:**

#### <u>/s/ Anne-Mari Paster, as an</u>

authorized signatory of each Reporting Person

\*\* Signature of Reporting Person Date

01/19/2021

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.