FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

# 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

1. Name and Address of Reporting Person*  Booth Bruce			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Unum Therapeutics Inc.</u> [ UMRX ]							(Ch	Relationship o							
(Last)	Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2019							-	X Directo Officer below)	r (give title		10% Ow Other (s below)		
C/O UNUM THERAPEUTICS INC. 200 CAMBRIDGE PARK DRIVE, SUITE 3100				If Amendment, Date of Original Filed (Month/Day/Year)							6.1	6. Individual or Joint/Group Filing (Check Applicable						
(Street) CAMBRIDGE MA 02140				4. II Amenument, Date of Original Flied (Month/Day/Year)							Lin							
(City)	(5	State)	(Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Exec Day/Year) if an		A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 3, 4) Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)				Beneficia Owned F	s ally ollowing	6. Own Form: I (D) or I (I) (Inst	Direct II ndirect E r. 4) C	7. Nature of Indirect Beneficial Ownership		
								Code V	·	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Co	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye		e Amount of		f g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	y E	LO. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	de V	,	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)	11(5)		
Stock Option (Right to Buy)	\$4.47	01/02/2019		A			6,757 <sup>(1)</sup>		(2)	01	1/02/2029	Common Stock	6,757	\$2.7	6,757		D <sup>(3)</sup>	

### **Explanation of Responses:**

- 1. The option award was issued to the Reporting Person, who elected to take shares in lieu of cash compensation for services as a director, pursuant to the Issuer's non-employee director compensation plan. The number of options granted was determined by dividing the cash compensation otherwise payable with respect to the quarter by the Black-Scholes value of a single option calculated as of the date of the grant.
- 2. This option is fully vested at time of grant.
- 3. This option was granted to the Reporting Person, a director of the Issuer. The proceeds of any sale of shares of common stock issued to the Reporting Person upon exercise of this option will be transferred to Atlas Venture Advisors, LLC and therefore the Reporting Person disclaims beneficial ownership of such shares.

# Remarks:

/s/ Frank Castellucci, as Attorney-in-Fact 01/04/2019

\*\* 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.