FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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OMB APPROVAL								
OMB Number:	OMB Number: 3235-0287							
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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).

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* Booth Bruce					2. Issuer Name and Ticker or Trading Symbol Unum Therapeutics Inc. [UMRX]						(Ch	elationship o eck all applica Director	Reporting Person(s) to Issuer able) 10% Own				
(Last) (First) (Middle) C/O UNUM THERAPEUTICS INC.					3. Date of Earliest Transaction (Month/Day/Year) 04/06/2020						Officer below)	(give title		Other (s below)	pecify		
200 CAMBRIDGE PARK DRIVE, SUITE 3100				4	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable						
(Street)	IDGE M	1A	02140									Line	X Form fil	ed by One I ed by More		-	
(City)	(5	State)	(Zip)														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date			2. Transacti Date Month/Day	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amour Securities Beneficia Owned Fo	s Form ally (D) o ollowing (I) (Ir		Direct I Indirect E tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	V	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	ion(s)			iiisu. 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)	rivative Conversion Date Execution I curity or Exercise (Month/Day/Year) if any		3A. Deemed Execution Date if any (Month/Day/Ye	Code	Transaction Code (Instr. 8) Ac or of		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour 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(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Stock Option (Right to Buy)	\$0.3495	04/06/2020		A		86,735 ⁽¹⁾		(2)		04/06/2030	Common Stock	86,735	\$0.2205	86,735		D ⁽³⁾	

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 as such, the Reporting Person disclaims beneficial ownership of the securities reported herein for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, except to the extent of this pecuniary interest therein, if any.

Remarks:

/s/ Frank Castellucci, as Attorney-in-Fact 04/08/2020

** 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.