FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL
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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* Orlinger Klaus							suer Name and Tio OKIPA Phar				(Ch	eck all appli Direct	cable) or	g Person(s) to Is				
(Last) (First) (Middle) C/O HOOKIPA PHARMA INC. 350 FIFTH AVENUE, 72ND FLOOR, SUITE 7240							ate of Earliest Tran	saction (Month	n/Day/Year)		X Officer (give title Other (sp below) Sr. VP, Research						
(Street) NEW YO	ORK	NY (Sta		10118 (Zip)		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
			Tab	le I - No	on-Deriv	ative	Securities Ac	quired	l, Di	sposed o	of, or Be	neficial	y Owne	d				
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/						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			Securiti Benefic	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	ction(s)		()		
Common	Stock				01/16/	2020		M		1,140	A	\$0.1	1,	,140	D			
Common Stock 01/16/20								M		571	A	\$0.1	1,	,711	D			
Common Stock 01/16/20								S		1,711	D	\$11.561	.2	0	D			
Common	Stock				01/21/	2020		M		6,789	A	\$0.1	6	,789	D			
Common	Stock				01/21/	2020		S		6,789	D	\$12.018	32	0	D			
			7	able II			ecurities Acq						Owned					
1. Title of Derivative	2. Conversi	on	3. Transaction Date (Month/Day/Year)	3A. Deer Execution		4. Transac	tion of	Expirati	5. Date Exercisable and Expiration Date			d f	8. Price of Derivative		Ownershi	11. Nature		

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) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative urities uired or oosed o) tr. 3, 4	6. Date Exerc Expiration Da (Month/Day/\)	ate	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(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$0.1	01/16/2020		M			1,140	(1)	12/31/2026	Common Stock	1,140	\$0	0	D	
Stock Option (Right to Buy)	\$0.1	01/16/2020		M			571	(2)	12/31/2026	Common Stock	571	\$0	14,530	D	
Stock Option (Right to Buy)	\$0.1	01/21/2020		М			6,789	(2)	12/31/2026	Common Stock	6,789	\$0	7,741	D	

Explanation of Responses:

- 1. This option is fully vested and exercisable.
- $2.\,25\% \ of \ this \ option \ vested \ and \ became \ exercisable \ on \ January \ 1, \ 2018, \ with \ the \ remainder \ vesting \ in \ 12 \ equal \ quarterly \ installments \ thereafter.$

/s/ Reinhard Kandera, as 01/21/2020 Attorney-in-Fact

** 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.