SEC Form 4
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## FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL

	-									
OMB Number:	3235-0287									
Estimated avera	Estimated average burden									
hours per respon	nse: 0.5									

to Section 16. F	Form 4 or Form 5 y continue. See	5	pursuant to Section 16(a) of the Securities Exchange Act of 193-	4	Estimated av hours per re	verage burden sponse:	0.5
1. Name and Addr O'Neill Julie		g Person <sup>*</sup>	or Section 30(h) of the Investment Company Act of 1940   2. Issuer Name and Ticker or Trading Symbol   HOOKIPA Pharma Inc.	5. Relationship of (Check all applic)	able)	son(s) to Issuer	
(Last) C/O HOOKIPA			3. Date of Earliest Transaction (Month/Day/Year) 10/21/2020	Officer below)	(give title	Other (specify below)	у
Storet) NEW YORK	NY (State)	D FLOOR, SUITE 7240 10118 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X Form fi	led by One Rep led by More tha	g (Check Applica orting Person n One Reporting	
	(0.0.0)		 tive Securities Acquired, Disposed of, or Bene	ficially Owne	d		

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(11501.4)
Common Stock	10/21/2020		A		4,969	A	\$ <mark>0</mark>	4,969	D	

	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 Date, if any (Month/Day/Year)	4. Transa Code ( 8)				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(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				

Explanation of Responses:

## /s/ Reinhard Kandera, as

Attorney-in-Fact

10/23/2020

\*\* 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.