## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	DС	20549
vvasiliigton,	D.O.	20040

Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

mondo	tion r(b).			i lieu							Company Act										
1. Name and Address of Reporting Person* SOFINNOVA CAPITAL VI FCPR					2. Issuer Name <b>and</b> Ticker or Trading Symbol HOOKIPA Pharma Inc. [ HOOK ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner								
(Last) (First) (Middle) C/O HOOKIPA PHARMA INC., 350 FIFTH AVENUE, 72ND FLOOR, SUITE 7240					09/1	3. Date of Earliest Transaction (Month/Day/Year) 09/15/2020										Officer (give title Other (specify below) below)					
(Street) NEW YORK NY 10118					4. 17	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)      Form filed by One Reporting Person      Y      Form filed by More than One Reporting Person						
(City)	(St	ate) (2	Zip)																		
			I - I	Non-Deriva				_		ed, D	-	-		icially	1						
Date		2. Transaction Date (Month/Day/Ye	ear) E	xecu any	eemed tion Date, h/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and		nd 5)	Securi Benefi Owner	5. Amount of Securities Beneficially Owned Following		Ownership m: Direct or irect (I)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)	Price	'rice		Reported Transaction(s) (Instr. 3 and 4)		str. 4)	(Instr. 4)		
Common	Common Stock			09/15/202	09/15/2020				<b>S</b> <sup>(1)</sup>		32,336	D	\$12.4	494(2)	3,915,755			<b>D</b> <sup>(3)</sup>			
Common	Stock			09/15/202	0				S <sup>(1)</sup>		9,261	D	\$13.1	641(4)	3,906,494		D <sup>(3)</sup>				
		Tal	ble	II - Derivati (e.g., ρι							sposed of s, converti				Owne	d					
1. Title of Derivative Security (Instr. 3)  2. Conversion Conversion Price of Derivative Security		se (Month/Day/Year)		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		vative urities uired or osed ) r. 3, 4	Expiration (Month/Date)			Amo Secu Unde Deriv	erlying rative rity (Ins	Der Sec (Ins	Price of ivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dat Exe	te ercisab	Expiration Date	n Title	or Numb of Share	er							
		Reporting Person*	FCI	<u>PR</u>																	
	OKIPA PH	(First) ARMA INC., 35 LOOR, SUITE 7	0 FI																		
(Street) NEW YO	ORK	NY		10118																	
(City)		(State)		(Zip)																	
	nd Address of ova Partn	Reporting Person*																			
	OKIPA PH	(First) ARMA INC., 35 LOOR, SUITE 7	0 FI																		
(Street)	ORK	NY		10118																	

(State)

(City)

 $1.\ Shares\ sold\ pursuant\ to\ a\ Rule\ 10b5-1\ trading\ plan\ previously\ adopted\ by\ the\ Reporting\ Person.$ 

(Zip)

- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$12.01 to \$13.00, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.
- 3. Sofinnova Partners SAS is the managing company of Sofinnova Capital VI FCPR and disclaims beneficial ownership of these shares except to the extent of its pecuniary interest therein, if any.
- 4. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$13.01 to \$13.37, inclusive. The Reporting Person undertakes to

provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.

/s/ Monique Saulnier, Name:
Monique Saulnier, Title:
Managing Partner of
Sofinnova Partners SAS

09/17/2020

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.