FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
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| hours per response. | 0.5 | | | | | | | |

| | | | | | or | Secti | ion 30(n) (| of the | Investmen | t Cor | npany Act | of 1940 | | | | | | | |
|--|---|--|---------------------|--|---|---|-------------|----------------------|---|--|--------------------|---|---|---|--|---|--|--------|--|
| | nd Address of ader Mar | Reporting Person* $\underline{\mathbf{k}}$ | | | | | | | ker or Trad cutics H | | | <u>с.</u> [СЕІ | | Relationship heck all appli Direct | cable) or |) Perso | 10% Ow | ner | |
| | | | | | - ' | | | | | | | | | X Office below | (give title | | Other (specification of the other contraction) | pecify | |
| (Last) C/O CEI INC. | , | irst) ERAPEUTICS I | (Middle) HOLDING | ·S, | | 3. Date of Earliest Transaction (Month/Day/Year) 10/28/2020 | | | | | | | See Remarks | | | | | | |
| 131 DARTMOUTH STREET, SUITE 502 | | | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | | | | | - | ,, | | | | | | | | Line) X Form filed by One Reporting Person | | | | | |
| BOSTO | N M | ÍΑ | 02116 | | | | | | | | | | | Form | Form filed by More than One Reporting Person | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution Date, | | | Code (Instr. 5) | | | | Benefici Owned | es Form ally (D) of Following (I) (II | | m: Direct or Indirect Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | Code | v | Amount | (A) o (D) | r Price | Reporte Transac (Instr. 3 | action(s) | | | Instr. 4) | | |
| | | • | Table II - I | | | | | | uired, D s, option | | | | | / Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion Or Exercise Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year) (Month/Day/Year) 3. Transaction Execution Date, if any (Month/Day/Year) 4. Transactic Code (Inst 8) | | | 5. Numl of Derivati Securiti Acquire (A) or Dispose of (D) (I 3, 4 and | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4) | | | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4) | y G | 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 | | | | | | |
| Stock Option (Right to Buy) | \$9.88 | 10/28/2020 | | | A | | 65,445 | | (1) | 1 | 0/28/2030 | Common Stock | 65,445 | \$0.00 | 65,445 | | D | | |

Explanation of Responses:

1.50% of this option shall vest and become exercisable on October 28, 2022, with the remainder vesting in two (2) equal annual installments thereafter.

Remarks:

Vice President, Finance and Chief Accounting Officer

/s/ Bryan K. Phillips, as Attorney-in-Fact

10/30/2020

** 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.