FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB	APPROVAL
CIVID	ALLINOVAL

OMB Number: 3235-0287

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

obligat	n 16. Form 4 or ions may contir tion 1(b).				Filed			o Section 16(a n 30(h) of the						34			- 11	rs per res	sponse:	0.5
		Reporting Person*	NT, LLC					ame and Ticke			Symbol					lationship of ck all applical Director Officer (ole)		10%	suer Owner r (specify
			3. Date of Earliest Transaction (Month/Day/Year) 10/01/2018									below) Former 10% Owner								
Street)	N I	MA	02116		_	4. If A	menc	lment, Date of	Origina	l Filed	I (Month/Day	//Yea	ar)	6	6. Ind	Form file	d by Or	ne Repo	rting Pers	oplicable Line) on orting Person
(City)	(State)	(Zip)																	
			Table I - N			_	_		_	d, Di					lly (1	
. Title of	Security (Ins	tr. 3)		Date	ansacti nth/Day		Exe if ar	Deemed cution Date, ny nth/Day/Year)	3. Transa Code (I 8)		4. Securitie Disposed C		(Instr. 3,		5)	5. Amount of Securities Beneficially Following Reported	Owned	6. Own Form: I (D) or II (I) (Inst	Direct ndirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	V	Amount		(A) or (D)	Price Reported Transaction(s) (Instr. 3 and 4)						
Common	Stock			10	/01/20	018			С		1,847,00)2	A	(1)		1,847,00)2 ⁽²⁾		I	See footnote ⁽³⁾⁽⁴⁾
Common	Stock			10	/01/20	018			С		291,410	0	A	(1)		2,138,41	2 ⁽⁵⁾		I	See footnote ⁽³⁾⁽⁴⁾
Common	Stock			10)/01/20	018			P		1,000,000) (6)	A	\$10	6	3,138,41	2 ⁽⁷⁾		I	See footnote ⁽³⁾⁽⁴⁾
			Table II					rities Acq							y Oı	wned				
. Title of Perivative Security Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	ite,	4. Transa Code (8)	ction	5. N Deri Sec Acq Disp	umber of ivative urities uired (A) or posed of (D) tr. 3, 4 and 5)		Exerc	cisable and	7. T Sec	Fitle and A curities U rivative S str. 3 and	Amount Inderlyii Security	ng	8. Price of Derivative Security (Instr. 5)	9. Num derivati Securit Benefic Owned Followi	ive ies cially ng	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Titl	l l	Amount or Number of Shares			Reported Transaction((Instr. 4)			
eries B referred tock	(1)	10/01/2018			С			6,002,761 ⁽⁸⁾	(1)		(1)		mmon tock	1,847,0	002	(1)	()	I	See footnote ⁽³⁾⁽⁴
eries C referred tock	(1)	10/01/2018			С			947,085 ⁽⁹⁾	(1)		(1)		mmon tock	291,4	10	(1)	()	I	See footnote ⁽³⁾⁽⁴
		Reporting Person* IANAGEME	NT, LLC																	
(Last) 20 PARI	K PLAZA, S	(First) SUITE 1200	(Midd	lle)																
Street)	N	MA	0211	16																
(City)		(State)	(Zip)																	
		Reporting Person* thcare Fund	LP																	

(First) (Middle) 20 PARK PLAZA, SUITE 1200 (Street) **BOSTON** 02116 MA (City) (State) (Zip) 1. Name and Address of Reporting $\mathsf{Person}^{^\star}$ **Kolchinsky Peter** (Last) (First) (Middle) 20 PARK PLAZA, SUITE 1200

(Street) BOSTON	MA	02116
(City)	(State)	(Zip)

Explanation of Responses:

- 1. With the closing of the Issuer's initial public offering, each 3.25 shares of preferred stock converted into one share of common stock. The preferred stock had no expiration date.
- 2. Includes (a) 1,551,482 shares of Common Stock held by RA Capital Healthcare Fund, L.P. (the "Fund") and (b) 295,520 shares of Common Stock held in a separately managed account (the "Account").
- 3. RA Capital Management, LLC (the "Adviser") is the general partner of the Fund and the investment adviser for the Account. Peter Kolchinsky is the sole manager of the Adviser. In their respective capacities, each of the Adviser and Dr. Kolchinsky may be deemed to beneficially own the reported securities for purposes of Section 13(d) of the Securities Exchange Act of 1934.
- 4. The Adviser and Dr. Kolchinsky disclaim beneficial ownership of the reported securities for purposes of Rule 16a-1(a)(1) under the Exchange Act in reliance on Rule 16a-1(a)(1)(v) and (vii), respectively, and therefore disclaim any obligation to report ownership of the reported securities under Section 16(a) of the Exchange Act. The filing of this Form 4 shall not be construed as an admission that either the Adviser or Dr. Kolchinsky is or was, for purposes of Rule 16a-1(a)(1) under the Exchange Act, the beneficial owner of any of the securities reported herein. Dr. Kolchinsky and the Adviser disclaim beneficial ownership of the securities reported herein for purposes of Rule 16a-1(a)(2) under the Exchange Act except to the extent of their pecuniary interest therein.
- 5. Includes 1,788,690 shares held by the Fund and 349,722 shares held in the Account.
- 6. Includes 827,049 shares of Common Stock held by the Fund and 172,951 held in the Account, in each case acquired in the Issuer's initial public offering.
- 7. Includes 2.615.739 shares held by the Fund and 522.673 shares held in the Account.
- 8. Includes 5,042,319 shares of Series B Preferred Stock held by the Fund and 960,442 shares of Series B Preferred Stock held in the Account.
- 9. Includes 770,927 shares of Series C Preferred Stock held by the Fund and 176,158 shares of Series C Preferred Stock held in the Account.

/s/ Peter Kolchinsky, Manager of RA Capital Management, LLC 10/03/2018

/s/ Peter Kolchinsky, Manager of

RA Capital Management, LLC, the General Partner of RA 10/03/2018

Capital Healthcare Fund, L.P.

/s/ Peter Kolchinsky, individually 10/03/2018

** 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.