SEC Form 4										
FOR	M 4	UNITED S	STATES S	ECURITIES Washingt	On, D.C. 2054					
Check this box if Section 16. Form obligations may of Instruction 1(b).		STATE	Filed pursuan	t to Section 16(a) c tion 30(h) of the Inv		OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
1. Name and Address of Reporting Person [*] Morrison Briggs				er Name and Ticker re Therapeut			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle)				of Earliest Transac 2024	ction (Month/D	ay/Year)	Officer (give title Other (specify below) below)			
C/O REPARE T (Street) ST-LAURENT	HERAPEUTIC		4. If Am	endment, Date of (Original Filed	(Month/Day/Year)	6. Indiv Line)	Form filed by Form filed by	roup Filing (Check A One Reporting Pers More than One Rep	son
(City)	(State)	(Zip)	Rule	10b5-1(c) T	ransacti	on Indication		Person		
		Table I - Non-D	sat	sfy the affirmative de	fense condition	ction was made pursuant to a s of Rule 10b5-1(c). See Ins oosed of, or Benefi	truction 10	0.	tten plan that is intend	ed to
1. Title of Security	(Instr. 3)		Transaction	2A. Deemed Execution Date,	3. Transaction	4. Securities Acquired (A)) or	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect

			Date (Mont	h/Day/Year)	Execution Date, if any (Month/Day/Year	Code (ransaction Disposed Of (D) (Instr. 3, 4 and ode (Instr. 5)			Beneficia	Beneficially (D) of Owned Following (I) (I		Form: Direct D) or Indirect I) (Instr. 4)			
						Code	v	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	ion(s)			Instr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
1. Title of	2.	3. Transaction	3A. Deemed	4.	5. Number	6. Date Ex	ercisa	able and	7. Title and	Amount	8. Price of	9. Number	of 10.		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. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)	\$3.8	06/17/2024		A		27,200		(1)	06/16/2034	Common Shares	27,200	\$0	27,200	D	

Explanation of Responses:

1. The option will vest in equal monthly installments over twelve (12) months from the date of grant, subject to Reporting Person continuing to provide service through each such date.

<u>/s/ Steve Forte, Attorney-in-</u> Fact	06/20/202
** 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.

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