SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287							
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X	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

						UI Sec	uon a		ivestine		npany Act	01 1940								
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol Werewolf Therapeutics, Inc. [HOWL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
								r							Director		Х	10% Ow	/ner	
(Last) (First) (Middle) BAKERY SQUARE, SUITE 200						3. Date of Earliest Transaction (Month/Day/Year) 05/04/2021									Officer (below)	give title		Other (s below)	pecify	
6425 PENN AVENUE				_ 4	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc Line)	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X						
PITTSB	URGH	PA	15206											Form file Person	ed by Mor	re than	One Report	ing		
(City)		(State)	(Zip)																	
		Ta	able I - Noi	n-Der	ivati	ve S	ecu	rities Acq	juired,	Dis	posed o	f, or E	Bene	ficially	Owned					
Date				Transaction ate lonth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction I Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			A) or , 4 and 5)	Securities Beneficial	5. Amount of Securities Beneficially Owned Following		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A (D	.) or))	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock	ock 05/04/2021 C B23,945 A ⁽¹⁾ 823,945					D													
Common	Stock	ock 05/04/2021 C 273,811 A (2) 1,097,				7,756		D												
			Table II -					ties Acqu varrants,							Owned					
1. Title of Derivative Security (Instr. 3) 2. Convers or Exerc Price of Derivativ Security			3A. Deemed Execution Da if any (Month/Day/Y	ate, 1	4. Transa Code (8)		Deri Sec Acq or D	umber of ivative urities uired (A) bisposed of (Instr. 3, 4 5)	6. Date Exercis Expiration Date (Month/Day/Yea		te	7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	ve es ally Ig d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)	
					Code	e V (A)		(D)	Date Exercisa	able	Expiration Date	Title	OI N	mount umber Shares		(Instr. 4)				
Series A	1	1				1	1	I								1		1	1	

1. On May 4, 2021, the Series A Preferred Stock automatically converted into Common Stock on a 8.6691-for-one basis without payment of further consideration upon closing of the initial public offering of the Issuer's common stock. The shares had no expiration date.

05/04/2021

05/04/2021

2. On May 4, 2021, the Series B Preferred Stock automatically converted into Common Stock on a 8.6691-for-one basis without payment of further consideration upon closing of the initial public offering of the Issuer's common stock. The shares had no expiration date.

(1)

(2)

7,142,857

2,373,701

Remarks:

Preferred

Stock Series B Preferred

Stock

(1)

(2)

Explanation of Responses:

<u>UPMC By: /s/ Jeanne Cunicelli,</u> <u>Executive Vice President</u> <u>05/04/2021</u>

** Signature of Reporting Person

823,945

273.811

\$0.00

\$0.00

0

0

Date

D

D

Common

Stock

Commor

Stock

(1)

(2)

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).

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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.