SEC Form 4	
FORM	4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average bur	den							
hours per response:								

		on <sup>*</sup>	2. Issuer Name and Ticker or Trading Symbol <u>TScan Therapeutics</u> , <u>Inc.</u> [ TCRX ]		tionship of Reporting Person(s) to Issuer : all applicable) Director 10% Owner		
	(First) HERAPEUTICS, 2	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/23/2024		Officer (give title below)	Other (specify below)	
			4. If Amendment, Date of Original Filed (Month/Day/Year)	Line)	idual or Joint/Group Filin		
(Street) WALTHAM	MA	02451		~	Form filed by One Rep Form filed by More tha Person	8	
(City)	(State)	(Zip)					

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Voting Common Stock	09/23/2024		Р		5,000	Α	\$5.29	45,000	D	
Voting Common Stock								25,000	Ι	By Trust <sup>(1)</sup>

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			( 0 / 1																		
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)		of Deriv Secu Acqu (A) o Dispo of (D (Instr	f Expiration Date (Month/Day/Year) S ecurities cquired (Month/Day/Year) S cquired (Month/Day/Year) S (Nor (C) (Month/Day/Year) S (Nor (C) (Month/Day/Year) S (Month/Day/Year) S (Month/D		of Expiratio		of Expiratic Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Expiration Date		e and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Amount of Derivative Securities Security Inderlying (Instr. 5) Derivative Security (Instr. and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares										

#### Explanation of Responses:

1. Shares held by the Klencke Huestis Trust, for which the Reporting Person serves as co-trustee along with her spouse. The Reporting Person disclaims beneficial ownership of these securities except to the extent of her pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all of the reported shares for purposes of Section 16 or for any other purpose.

### /s/ Barbara Klencke

\*\* Signature of Reporting Person Date

09/24/2024

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.