## FORM 4

obligations may continue. See

Instruction 1(b).

## 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	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
-blinetiana manifesta Car	

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

1. Name and Address of Reporting Person*  Sandercock Colin					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Cue Biopharma, Inc. [ CUE ]										k all app Dired	olicable) ctor	g Person(s) to Issuer  10% Owner		
(Last) 21 ERIE	`	rst) (	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/06/2019								X	belov	,	belov	Other (specify below)  ounsel and Sec	
(Street) CAMBR			02139 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Ind Line)	Forn Forn	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson					
		Tab	le I - No	n-Deri\	ative/	Se	curitie	es Ac	quired,	, Dis	posed o	f, or l	Bene	ficially	Owne	ed			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	Amount (A)		Price	Trans	action(s) 3 and 4)		(111341.4)		
Common	ommon Stock 06/06/2				5/2019	2019		P		2,000	)	A	<b>\$7.1</b> <sup>(1)</sup>	2,000		D			
Common	Stock			06/10	)/2019				P		14,938	8	A	\$7.93 <sup>(2)</sup>	.93 <sup>(2)</sup> 16,938 D				
		Ta									sed of, onvertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	n Date,		ransaction Code (Instr.				Exercis on Dat Day/Ye		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				•	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	per					

## **Explanation of Responses:**

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$7.04 to \$7.16, inclusive. The reporting person undertakes to provide to Cue Biopharma, Inc. (the "Issuer"), any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in this footnote (1) to this Form 4.
- 2. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$7.80 to \$8.45, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in this footnote (2) to this Form 4.

## Remarks:

/s/ Colin Sandercock by Mark Busch, attorney-in-fact

06/10/2019

\*\* 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.