FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person*     HO WILLIAM						2. Issuer Name and Ticker or Trading Symbol RAPT Therapeutics, Inc. [ RAPT ]									ck all app Direc Office	tor 10% Own er (give title Other (sp		vner	
(Last) (First) (Middle) C/O RAPT THERAPEUTICS, INC. 561 ECCLES AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 06/01/2020								Chief Medical Officer						
(Street) SOUTH FRANCI	SCO		4080 Zip)		4. If A									Line)	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution D		Date,	Code (Instr.					, 4 and Securi Benefi		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ect (	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	ount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				(o)	
Common Stock 06/01/					2020		S <sup>(1)</sup>		1,000	Ι	) :	\$1 <mark>8.5</mark>	8.5 73,858		D				
		Tal									osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Execution Date, Tr (Month/Day/Year) if any Co			ransaction of ode (Instr. Deriva		rative rities ired r osed )	Expiration Da		te Amount		unt of rities rlying ative rity (Ins	D S (I	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Own Form Direc or In (I) (Ir		Beneficial Ownership (Instr. 4)	
					Code	Code V (A) (D)			Date Exercis	able	or Nu Expiration of		Numl	ber					

## **Explanation of Responses:**

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by Reporting Person.

## Remarks:

/s/ Karen C. Lam, attorney-infact for William Ho

06/02/2020

\*\* 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.