FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
---------------	------	-------

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

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

Inetruc	tion 1(b).	ide. dee		Filed	ourouo	nt to Soction	16/	a) of the Secu	rition Evolun	an Ant of 1	024		nours per	response.	0.5
msuuc	uon nu).			rileu	or Se	ction 30(h)	of the	Investment C	Company Act	of 1940	934				
l	nd Address of Rodney K	Reporting Person*			2. Issu RAP	er Name ar PT Thera	nd Tic Lpeu	ker or Trading tics, Inc.	Symbol			eck all applic Directo	cable) or	Person(s) to Iss	vner
(1 1)	(5		(M.C.J.JL-1)								_ '	X Officer below)	(give title	Other (: below)	specify
(Last) (First) (Middle) C/O RAPT THERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 01/31/2023					Chief Financial Officer					
	LES AVEN				01/51	72023									
301 ECC	LES AVEN	NUE									_				
(Street)					4. If Ar	mendment,	Date	of Original Fil	ed (Month/Da	ay/Year)	6. li		loint/Group Fi	ling (Check Ap	plicable
SOUTH	SAN C	٨	94080									X Form f	iled by One R	eporting Perso	n
FRANCI	ISCO C.	A	94 000									Form f Persor		han One Repo	rting
-												Persor	ı		
(City)	(S	tate)	(Zip)												
		Tab	le I - Non-	Derivat	ive S	Securities	s Ac	quired, D	isposed c	of, or Be	neficial	y Owned			
Date			2. Transac Date (Month/Da	Execution Date		Code (Instr. 5)				Beneficia	es Form ally (D) of Following (I) (II	orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code V	Amount	(A) or (D)	Price	Transact (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 Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year)			Co	ransaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Cod	de V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (right to	\$29.05	01/31/2023		А		68,000		(1)	01/30/2033	Common Stock	68,000	\$0.00	68,000	D	

Explanation of Responses:

1. 1/48th of the shares subject to the option shall vest on each monthly anniversary of the vesting commencement date of January 1, 2023.

Remarks:

/s/ Rodney Young

02/02/2023

** 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.