FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 2. Date of Event 3. Issuer Name and Ticker or Trading Symbol 1. Name and Address of Reporting Person* Requiring Statement (Month/Day/Year) <u>Immuneering Corp</u> [IMRX] Cormorant Asset Management, 04/20/2023 LP 4. Relationship of Reporting Person(s) to 5. If Amendment, Date of Original Filed (Month/Day/Year) (Last) (First) (Middle) (Check all applicable) X 10% Owner Director 200 CLARENDON STREET 6. Individual or Joint/Group Filing Officer (give Other (specify (Check Applicable Line) 52ND FLOOR title below) below) Form filed by One Reporting Person (Street) Form filed by More than One Reporting Person **BOSTON** 02116 MA (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 1. Title of Security (Instr. 4) 3. Ownership 2. Amount of Securities 4. Nature of Indirect Beneficial Form: Direct Beneficially Owned (Instr. Ownership (Instr. 5) 4) (D) or Indirect (I) (Instr. 5) See Footnotes(1)(2) Class A Common Stock 4,204,364 Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and 3. Title and Amount of Securities 6. Nature of Underlying Derivative Security (Instr. 4) Conversion Indirect Beneficial **Expiration Date** Ownership (Month/Day/Year) or Exercise Ownership (Instr. Form: Direct (D) Price of **Amount** Derivative or Indirect Security (I) (Instr. 5) Number Date Expiration of Exercisable Date Title **Shares** 1. Name and Address of Reporting Person

Cormorant Asset Management, LP			
(Last)	(First)	(Middle)	
200 CLAREN	NDON STREET		
52ND FLOO	R		
(Street)			
BOSTON	MA	02116	
(City)	(State)	(Zip)	
Cormorant Fund, LP	Global Healt	hcare Master	
<u>1 unu, 151</u>			
(Last)	(First)	(Middle)	
(Last)	(First) NDON STREET	(Middle)	
(Last)	NDON STREET	(Middle)	
(Last) 200 CLAREN	NDON STREET	(Middle)	
(Last) 200 CLAREN 52ND FLOO	NDON STREET	(Middle)	

1. Name and Address of Reporting Person* <u>Cormorant Private Healthcare Fund III LP</u>				
(Last)	(First)	(Middle)		
200 CLARENDON STREET				
52ND FLOOI	R			
(Street)				
BOSTON	MA	02116		
(City)	(State)	(Zip)		
1. Name and Add	dress of Reporting	Person*		
(Last)	(First)	(Middle)		
C/O CORMORANT ASSET MANAGEMENT, LP				
200 CLARENDON STREET, 52ND FLOOR				
(Street)				
BOSTON	MA	02116		
(City)	(State)	(Zip)		

Explanation of Responses:

- 1. Cormorant Asset Management, LP ("Cormorant") serves as the investment manager of Cormorant Global Healthcare Master Fund, LP (the "Master Fund") and Cormorant Private Healthcare Fund III, LP ("Fund III"). Cormorant Global Healthcare GP, LLC ("GP LLC") and Cormorant Private Healthcare GP III, LLC ("GP III") serve as General Partner of the Master Fund and Fund III, respectively. Bihua Chen serves as manager of Cormorant, GP LLC and GP III. Each of the Reporting Persons disclaims beneficial ownership of the shares reported herein except to the extent of its or her pecuniary interest therein, and the filing of this Form 3 shall not be construed as an admission that any of the Reporting Persons is the beneficial owner of any such shares for purposes of Section 16(a) of the Securities Exchange Act of 1934 or for any other purpose.
- 2. Represents (i) 1,996,779 shares of Class A Common Stock beneficially owned by the Master Fund and (ii) 2,207,585 shares of Class A Common Stock beneficially owned by Fund III

/s/ CORMORANT ASSET MANAGEMENT, LP By:

Cormorant Asset 04/24/2023

Management GP, LLC its

General Partner

/s/ CORMORANT

GLOBAL HEALTHCARE

MASTER FUND, LP By:

Cormorant Global

Healthcare GP, LLC its

General Partner

/s/ CORMORANT

PRIVATE HEALTHCARE

FUND III, LP By:

Cormorant Private

Healthcare GP III, LLC its 04/24/2023

General Partner By: Bihua

Chen, its Manager

Member

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<u>/s/ BIHUA CHEN</u> <u>04/24/2023</u>

** Signature of Reporting

Date

04/24/2023

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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 5 (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.