

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

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 burden hours per response:	0.5

1. Name and Address of Reporting Person* <u>Cardama Alfonso Quintas</u>  (Last) (First) (Middle) <u>C/O TCR2 THERAPEUTICS</u> <u>100 BINNEY STREET</u>  (Street) <u>CAMBRIDGE</u> <u>MA</u> <u>02142</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>TCR2 THERAPEUTICS INC. [ TCRR ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Chief Medical Officer</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>12/15/2022</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

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)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
<u>Common Stock</u>								<u>109,459</u>	<u>D</u>	

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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
<u>Stock Option (Right to Buy)</u>	<u>\$0.97</u>	<u>12/15/2022</u>		<u>A</u>		<u>70,649</u>		<u>(1)</u>	<u>12/14/2032</u>	<u>Common Stock</u>	<u>70,649</u>	<u>\$0.00</u>	<u>70,649</u>	<u>D</u>	
<u>Restricted Stock Unit (Right to Buy)</u>	<u>(2)</u>	<u>12/15/2022</u>		<u>A</u>		<u>11,775</u>		<u>(3)</u>	<u>(3)</u>	<u>Common Stock</u>	<u>11,775</u>	<u>\$0.00</u>	<u>11,775</u>	<u>D</u>	

Explanation of Responses:

1. 25% of this option shall vest and become exercisable on the one-year anniversary of the date of grant, with the remainder vesting in thirty-six (36) equal monthly installments thereafter.
2. Each restricted stock unit represents a right to receive one share of the issuer's common stock at the time of vesting for no consideration.
3. The restricted stock units will vest 25% on the one-year anniversary of the date of grant, with the remainder vesting in three equal annual installments thereafter.

Remarks:

/s/ Margaret Siegel as Attorney-in-Fact 12/19/2022

\*\* 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.