FORM 4

UNITED STATES SECU

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

KII	IES	AND	EXC	HANGE	COMIN	IISSION
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OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10

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

Instruc	tion 10.																
1. Name and Address of Reporting Person* Isaacs Randi					2. Issuer Name and Ticker or Trading Symbol Werewolf Therapeutics, Inc. [HOWL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
15ddC5	<u>realital</u>											Director					
				_ <u> -</u>								Officer (below)	(give title		Other (s _l elow)	pecity	
(Last)	`	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025						Chief Medical Officer						
C/O WEREWOLF THERAPEUTICS, INC.					01/02/2023												
200 TALCOTT AVENUE, 2ND FLOOR					A 16 Amandanast Data of Original Filad (Month Do. 26 c.)						6 15	6 Individual or Isiat/Crows Filing (Cheek A*					
(011)				— *	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	rown M	T A	02472									Form fil	ed by One F	Reporting	Person		
WAIEK	WATERTOWN MA 02472											Form filed by More than One Reporting Person					
(City)	(S	state)	(Zip)							1 010011							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Ins	Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr.			5. Amoun Securities Beneficia Owned Fo	s F lly (ollowing (6. Owners Form: Dire D) or Indi I) (Instr. 4	ect I rect E	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	Amour	(A) c	Price	Transacti (Instr. 3 a	on(s)			msu. 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)	tive Conversion Date Execution Date, True or Exercise (Month/Day/Year) if any			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e s i (A) sed str.	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 derivative Securities Beneficially Owned Following Reported	Ow For Dire or I (I) (nership m: ect (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction (Instr. 4)	n(s)			
Stock Option (right to buy)	\$1.56	01/02/2025		A		187,500		(1)	12/31/203	4 Common Stock	187,500	\$0	187,500		D		
Stock Option (right to	\$1.56	01/02/2025		A		68,151		01/02/2027	12/31/203	Common Stock	68,151	\$0	68,151		D		

Explanation of Responses:

1. The option was granted on January 2, 2025 with a Vesting Commencement Date of January 1, 2025. The shares underlying the option vest in equal monthly installments over four years, with the initial vesting to commence on the date that is one month following the Vesting Commencement Date and vesting monthly thereafter through January 1, 2029.

/s/ Jonathan Owen, Attorney-in-01/06/2025

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** 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.