FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235- 0104						
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Hohneker John 2. Date of Event Requiring Statement (Month/Day/Year) 04/01/2024		Statement //Year)	3. Issuer Name and Ticker or Trading Symbol <u>Carisma Therapeutics Inc.</u> [CARM]						
(Last) (First) (Middle) 3675 MARKET STEET,		4. Relationsh Issuer (Check all ap		hip of Reporting Person(s) to pplicable)		5. If Amendment, Date of Original Filed (Month/Day/Year)			
SUITE 200			X Director Officer (give title below)	10% C Other below)	(specify	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting			
(Street) PHILADELPHIA PA 19104	-		,	ŕ		A Person	by More than One		
(City) (State) (Zip)									
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. I)			Nature of Indirect Beneficial Ownership (Instr. 5)			
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 Expiration Date (Month/Day/Year)		ate	Underlying Derivative Security (Instr. 4) Co		4. Conversio or Exercis Price of	e Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	t Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)		

Explanation of Responses:

Remarks:

Exhibit 24.1 - Power of Attorney

No securities are beneficially owned.

/s/ Eric Siegel, as

Attorney-in-Fact for John 04/01/2024

Hohneker

** Signature of Reporting

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 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.