SEC For	m 4 FORM	4		) STA	TES	s se	ECUR	ITIE	ES AND	) E	ХСНА	NGE	CON	имі	SSION					
						Washington, D.C. 20549												OMB APPROVAL		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See					NT	NT OF CHANGES IN BENEFICIAL OWNERSHIP											OMB Number: 3235-02 Estimated average burden hours per response:			
	tion 1(b).			File					a) of the Sec Investment				1934			liouia			0.5	
1. Name and Address of Reporting Person* Schwartz Jeffrey Lawrence						2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>RAPID MICRO BIOSYSTEMS, INC.</u> [ <u>RPID</u> ]									elationship o eck all applio	cable) or	ng Pers X	( 10% O	wner	
(Last) C/O BAI	ast) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 05/04/2023									Officer below)	(give title		Other (: below)	specify	
INVESTORS 200 CLARENDON STREET					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) BOSTON MA 02116														Form filed by More than One Reporting Person				rting		
					R	Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Tab	ole I - Nor	n-Deriv	vativ	e Se	curities	s Ac	quired, D	Disp	oosed o	of, or Be	enefi	iciall	y Owned					
1. Title of Security (Instr. 3) Date (Month/D					ear)   I	2A. Deemed Execution Date, f any (Month/Day/Year)		Transaction Di Code (Instr. 5)		4. Securi Disposed 5)	. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an D			5. Amour Securitie Beneficia Owned F	s ally ollowing	Form (D) o	vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D) Pri		Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
		-	Table II -						uired, Dis , options						Owned		<u> </u>	'		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	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 Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy 9	y Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		expiration Date	Title	or Nur of	ount mber ares						
Stock Option (Right to Buy)	<b>\$</b> 0.8705	05/04/2023			Α		25,000		(1)	0	5/03/2033	Class A Commor Stock	25	,000	\$0.00	25,00	0	D		

Explanation of Responses:

1. The option shall vest and become exercisable in full on the earlier of (i) the first anniversary of the Grant Date, or (ii) the day immediately prior to the date of the next annual meeting of the stockholders of the Company provided that the Reporting Person remains in continuous service on such vesting date.

Remarks:

/s/ Jeffrey Schwartz	
** O'ment of Describer Describer	

<u>05/05/2023</u> Date

\* Signature of Reporting Person

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.