FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Xencor Inc					2. Issuer Name and Ticker or Trading Symbol Inmune Bio, Inc. [INMB]											o of Reportir licable) tor	ng Pe	()	
(Last) 111 W. L	st) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/10/2021									Office below	er (give title v)		Other (below)	specify
(Street) MONRO (City)			1016 Zip)			Amend 14/202	,	Date	of Orig	inal File	ed (Month/Da		. Indiv ine) X	Form	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson				
		Table	I - N	on-Deriva	tive S	Secui	rities	Ac	quire	d, Dis	sposed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/			Year)	if any	med on Date, Day/Year)		3. 4. Securities Disposed Of Code (Instr. 8)					and 5) Securi Benefi Owned		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price			ted action(s) 3 and 4)			(Instr. 4)
Common Stock			06/10/20	6/10/2021				J ⁽¹⁾		192,533(2)	A	\$17.	4 ⁽¹⁾ 1,777,5		7,533 ⁽²⁾		D		
	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)	Exec if any	Deemed ution Date, / tth/Day/Year)		Transaction of Code (Instr. Deri			Expir	te Exer ration D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Deri Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. On October 3, 2017, INmune Bio Inc. ("INmune") entered into a license agreement ("Xencor License Agreement") with Xencor, Inc. ("Xencor"). In connection with the Xencor License Agreement, INmune granted Xencor an option to purchase an additional number of shares of common stock equal to 10% of the fully diluted company shares immediately following such purchase (the "Option"). On June 10, 2021, INmune entered into an Option Cancellation Agreement with Xencor, pursuant to which Xencor agreed to cancel the Option and terminate certain other rights in exchange for these shares and \$15,000,000. The number of shares was determined by dividing \$3.3 million by the closing price of INmune's common stock on June 10, 2021.

2. On June 14, 2021, Xencor filed a Form 4 which inadvertently reported that Xencor acquired 192,532 shares of common stock in the Option Cancellation Transaction. As reported in this amendment, Xencor actually acquired 192,533 shares of common stock in the Option Cancellation Transaction. The original Form 4 also inadvertently indicated that Xencor beneficially owned 1,777,532 shares of common stock following the Option Cancellation Transaction, but Xencor actually beneficially owned 1,777,533 shares of common stock

/s/ John J. Kuch

09/08/2021

** 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.