SEC Form 4	
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X

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Instruct	tion 1(b).		File						urities Excha Company Ac								
	nd Address of ed Israel	f Reporting Person <sup>*</sup> GP Ltd.							ing Symbol <u>C.</u> [ NVUS	]		. Relationshi Check all app Direc	licable	) )	( )	Issuer Owner	
	(Fi PINAT HAY NG E, 11TI	EHUDIM ST.	/liddle)		Date of E (02/202		ansacti	ion (Mc	nth/Day/Year	)		Office below	er (give v)	e title	Othe below	r (specify v)	
(Street) HERZLI (City)	IYA L3	; 4	614001 <sup>rip</sup> )	4. lf	Amend	ment, Da	ite of O	riginal	Filed (Month/	Day/Yea			filed b	Group Fili y One Re y More th	porting Pe	rson	
		Table	I - Non-Deriv	ative	Secu	rities A	cqui	red, [	Disposed	of, or	Benefic	ially Own	ed				
D		2. Transaction Date (Month/Day/Y	ar) 2A. Deemed Execution Date, if any (Month/Day/Year)		xecution Date, any Code (Instr. 5)		Acquire (D) (Inst	d (A) or r. 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported		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	Transation(a)		ransaction(s)			
Common	Stock		12/02/202	.0			s		103,200	D	\$21.6	73,65	0	Ι	Se Fc	e otnotes <sup>(1)(2)</sup>	
		Tal	ole II - Derivat (e.g., p						sposed of s, convert				d	<u>.</u>			
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)	Code	saction e (Instr.	5. Numb of Derivati Securiti Acquire (A) or	ve (M es	piratio	tercisable and 1 Date ay/Year)	Amo Secu Und Deri	tle and ount of urities erlying vative urity (Instr.	8. Price of Derivative Security (Instr. 5)	deriva Secu	rities ficially ed	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficia Ownersh t (Instr. 4)	

Date

Exercisable

Code ۱v (A) (D) Expiration Date

or Number

Shares

of

Title

1. Name and Address of Reporting Person <sup>*</sup>
OrbiMed Israel GP Ltd

	<u>Or Liu.</u>	
(Last)	(First)	(Middle)
89 MEDINAT HA	YEHUDIM ST.	
BUILDING E, 117	TH FLOOR	
(Street)		
HERZLIYA	L3	4614001
(City)	(State)	(Zip)
1. Name and Address OrbiMed Israel Partnership	of Reporting Person <sup>*</sup> BioFund GP Li	<u>mited</u>
(Last)	(First)	(Middle)
89 MEDINAT HA	YEHUDIM ST	
(Street)		
(Street) HERZLIYA	L3	4614001

## Explanation of Responses:

1. These securities are owned directly by OrbiMed Israel Partners Limited Partnership ("OIP"). OrbiMed Israel BioFund GP Limited Partnership ("OrbiMed BioFund") is the general partner of OIP, and OrbiMed Israel GP Ltd. ("OrbiMed Israel") is the general partner of OrbiMed BioFund. By virtue of such relationships, OrbiMed Israel and OrbiMed BioFund may be deemed to have voting and investment power with respect to the securities held by OIP and as a result may be deemed to beneficially own such securities for purposes of Rule 13d-3 under the Securities Exchange Act of 1934, as amended (the "Exchange Act"). OrbiMed Israel exercises this investment and voting power through a management committee comprised of Carl L. Gordon, Jonathan T. Silverstein, Nissim Darvish, Anat Naschitz, and Erez Chimovits.

2. This report on Form 4 is jointly filed by OrbiMed Israel and OrbiMed BioFund. Each of the Reporting Persons disclaims beneficial ownership of the securities reported herein for purposes of Rule 16a-1(a) under the Exchange Act, except to the extent of its pecuniary interest therein, if any. This report shall not be deemed an admission that any of the Reporting Persons is a beneficial owner of such

securities for the purposes of Section 16 of the Exchange Act, or for any other purposes.

<u>/s/ Douglas Coon, Chief</u> <u>Compliance Officer</u> <u>/s/ Douglas Coon, Chief</u> <u>Compliance Officer</u>

12/04/2020

12/04/2020

\*\* 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.