

(Print or Type Responses)

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden nours per response 0.5				
nours per response				

#### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 * Fitzgerald Richard F	2. Date of Event Requiring Statement (Month/Day/Year) 07/14/2021		3. Issuer Name and Ticker or Trading Symbol cleantech Acquisition Corp. [CLAQU]					
(Last) (First) (Middle) IMMUNOME, INC., 665 STOCKTON DRIVE, SUITE 300	07/14/2021		4. Relationship of Issuer (Check	Reporting Person all applicable)	Filed(Mon	endment, Date Original th/Day/Year)		
(Street) EXTON, PA 19341			X Officer (give title Other (specify below)  Chief Financial Officer		Applicable l _X_ Form fi	lual or Joint/Group Filing(Check Line) iled by One Reporting Person led by More than One Reporting Person		
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)		2. Amount of Se Beneficially Ow (Instr. 4)	ned		4. Nature of Indire (Instr. 5)	ect Beneficial Ownership		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  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 control number.  Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)  2. Date Exernand Expiration (Month/Day/Year)		3. Title and A Securities Un Security (Instr. 4)	Amount of nderlying Derivativ	or Exercise Form Price of Derivative Section	5. Ownership Form of Derivative Security: Direct	Ownership (Instr. 5)		
	Date Expiration Date	on Title Amount Shares	nt or Number of	Security	(D) or Indirect (I) (Instr. 5)			
D 4' 0								

#### **Reporting Owners**

	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Fitzgerald Richard F IMMUNOME, INC. 665 STOCKTON DRIVE, SUITE 300 EXTON, PA 19341			Chief Financial Officer	

### **Signatures**

/s/ Richard Fitzgerald	07/27/2021
**Signature of Reporting Person	Date

## **Explanation of Responses:**

#### No securities are beneficially owned

- \* 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.