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

#### **SCHEDULE 13G**

#### **Under the Securities Exchange Act of 1934**

(Amendment No. )\*

#### <u>CYTOMX THERAPEUTICS, INC.</u> (Name of Issuer)

Common Stock, par value \$0.00001 per share (Title of Class of Securities)

#### 23284F105 (CUSIP Number)

January 25 2021 (Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

 $\square Rule 13d-1(b)$  $\square Rule 13d-1(c)$  $\square Rule 13d-1(d)$ 

\*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

| 1  | NAMES OF REPORTING PERSONS                                     |                             |   |  |  |  |  |  |  |  |
|----|--|-----------------------------|---|--|--|--|--|--|--|--|
|    | I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)    |                             |   |  |  |  |  |  |  |  |
|    |  |                             |   |  |  |  |  |  |  |  |
|    | KA Capital Mana  | RA Capital Management, L.P. |   |  |  |  |  |  |  |  |
| 2  | CHECK THE AD   |                             | TE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS)                            |  |  |  |  |  |  |  |
| 2  | CHECK THE AP   | PROPRIA                     | $(a) \qquad \Box$   |  |  |  |  |  |  |  |
|    |  |                             | (a) 🗆   |  |  |  |  |  |  |  |
|    |  |                             | (b) 🗆   |  |  |  |  |  |  |  |
|    |  |                             |   |  |  |  |  |  |  |  |
| 3  | SEC USE ONLY   |                             |   |  |  |  |  |  |  |  |
|    |  |                             |   |  |  |  |  |  |  |  |
| 4  | CITIZENSHIP OR PLACE OF ORGANIZATION                           |                             |   |  |  |  |  |  |  |  |
|    |  |                             |   |  |  |  |  |  |  |  |
|    | Delaware   |                             |   |  |  |  |  |  |  |  |
|    |  |                             |   |  |  |  |  |  |  |  |
| NI |  | 5                           | SOLE VOTING POWER   |  |  |  |  |  |  |  |
|    | UMBER OF<br>SHARES   |                             | 0   |  |  |  |  |  |  |  |
|    | NEFICIALLY   |                             | 0   |  |  |  |  |  |  |  |
|    | WNED BY  | 6                           | SHARED VOTING POWER   |  |  |  |  |  |  |  |
| 0  | EACH   | Ū                           |   |  |  |  |  |  |  |  |
| RI | EPORTING   |                             | 3,500,000   |  |  |  |  |  |  |  |
|    | PERSON   |                             |   |  |  |  |  |  |  |  |
|    | WITH:  | 7                           | SOLE DISPOSITIVE POWER  |  |  |  |  |  |  |  |
|    |  |                             |   |  |  |  |  |  |  |  |
|    |  |                             | 0   |  |  |  |  |  |  |  |
|    |  |                             |   |  |  |  |  |  |  |  |
|    |  | 8                           | SHARED DISPOSITIVE POWER  |  |  |  |  |  |  |  |
|    |  |                             | 3,500,000   |  |  |  |  |  |  |  |
| 9  | AGGREGATE A  | MOUNTI                      | BENEFICIALLY OWNED BY EACH REPORTING PERSON                                 |  |  |  |  |  |  |  |
|    | AUGREGATE ANIGUNT DENEFICIALLI OWINED DI EACH REFORTING FERSON |                             |   |  |  |  |  |  |  |  |
|    | 3,500,000  |                             |   |  |  |  |  |  |  |  |
|    |  |                             |   |  |  |  |  |  |  |  |
| 10 | CHECK BOX IF   | THE AGO                     | GREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS) $\Box$ |  |  |  |  |  |  |  |
| L  |  |                             |   |  |  |  |  |  |  |  |
| 11 | PERCENT OF C   | LASS REI                    | PRESENTED BY AMOUNT IN ROW 9  |  |  |  |  |  |  |  |
|    | 5.00/  |                             |   |  |  |  |  |  |  |  |
|    | 5.8%   |                             |   |  |  |  |  |  |  |  |
| 12 | TYDE OF DEDODTING DEDSON (SEE INSTRUCTIONS)                    |                             |   |  |  |  |  |  |  |  |
| 12 | TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)                    |                             |   |  |  |  |  |  |  |  |
|    | IA, PN   |                             |   |  |  |  |  |  |  |  |
|    |  |                             |   |  |  |  |  |  |  |  |
| J  | 1  |                             |   |  |  |  |  |  |  |  |

| 1  | NAMES OF REPORTING PERSONS<br>I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)             |   |  |  |  |  |  |  |  |
|----|---|---|--|--|--|--|--|--|--|
|    | Peter Kolchinsky  |   |  |  |  |  |  |  |  |
|    |   |   |  |  |  |  |  |  |  |
| 2  | CHECK THE AP  | PROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS) |  |  |  |  |  |  |  |
|    |   | (a) 🗆   |  |  |  |  |  |  |  |
|    |   | (b) 🗆   |  |  |  |  |  |  |  |
| 3  | SEC USE ONLY  |   |  |  |  |  |  |  |  |
| 4  | CITIZENSHIP OI  | R PLACE OF ORGANIZATION                                 |  |  |  |  |  |  |  |
|    | United States of A  | Imerica   |  |  |  |  |  |  |  |
|    | Onited States of A  |   |  |  |  |  |  |  |  |
|    |   | 5 SOLE VOTING POWER                                     |  |  |  |  |  |  |  |
|    |   | 0   |  |  |  |  |  |  |  |
| -  | NUMBER OF   |   |  |  |  |  |  |  |  |
|    | SHARES  | 6 SHARED VOTING POWER                                   |  |  |  |  |  |  |  |
| В  | ENEFICIALLY   | 2,500,000   |  |  |  |  |  |  |  |
|    | OWNED BY  | 3,500,000   |  |  |  |  |  |  |  |
|    | EACH  | 7 SOLE DISPOSITIVE POWER                                |  |  |  |  |  |  |  |
|    | REPORTING   | 0   |  |  |  |  |  |  |  |
|    | KEPOKIIING  |   |  |  |  |  |  |  |  |
|    | PERSON  |   |  |  |  |  |  |  |  |
|    | WITH:   | 8 SHARED DISPOSITIVE POWER                              |  |  |  |  |  |  |  |
|    |   | 3,500,000   |  |  |  |  |  |  |  |
| 9  | AGGREGATE AN  | MOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON       |  |  |  |  |  |  |  |
|    | 2 500 000   |   |  |  |  |  |  |  |  |
| 10 | 3,500,000   O CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS) |   |  |  |  |  |  |  |  |
| 11 | 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9  |   |  |  |  |  |  |  |  |
| 11 | II PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9  |   |  |  |  |  |  |  |  |
|    | 5.8%  |   |  |  |  |  |  |  |  |
| 12 | TYPE OF REPOR   | RTING PERSON (SEE INSTRUCTIONS)                         |  |  |  |  |  |  |  |
|    | HC, IN  |   |  |  |  |  |  |  |  |
|    |   |   |  |  |  |  |  |  |  |
|    |   |   |  |  |  |  |  |  |  |

| 1      | 1 NAMES OF REPORTING PERSONS<br>I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY) |      |   |  |  |  |  |  |
|--------|---|------|---|--|--|--|--|--|
|        | Rajeev Shah   |      |   |  |  |  |  |  |
| 2      | CHECK THE API   | PROP | RIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS) |  |  |  |  |  |
|        |   |      | (a) 🗆   |  |  |  |  |  |
|        |   |      | (b) 🗆   |  |  |  |  |  |
| 3      | SEC USE ONLY  |      |   |  |  |  |  |  |
| 4      | CITIZENSHIP OR PLACE OF ORGANIZATION  |      |   |  |  |  |  |  |
|        | United States of America  |      |   |  |  |  |  |  |
|        | I   | 5    | SOLE VOTING POWER                                   |  |  |  |  |  |
|        |   |      | 0   |  |  |  |  |  |
| 1      | NUMBER OF   |      |   |  |  |  |  |  |
|        | SHARES  | 6    | SHARED VOTING POWER                                 |  |  |  |  |  |
| В      | ENEFICIALLY   |      | 3,500,000   |  |  |  |  |  |
|        | OWNED BY  |      |   |  |  |  |  |  |
|        | EACH  | 7    | SOLE DISPOSITIVE POWER                              |  |  |  |  |  |
|        | REPORTING   |      | 0   |  |  |  |  |  |
| PERSON |   |      |   |  |  |  |  |  |
|        | WITH:   | 8    | SHARED DISPOSITIVE POWER                            |  |  |  |  |  |
|        |   |      | 3,500,000   |  |  |  |  |  |
| 9      | AGGREGATE AN  | MOUN | T BENEFICIALLY OWNED BY EACH REPORTING PERSON       |  |  |  |  |  |
|        | 3,500,000   |      |   |  |  |  |  |  |
| 10     |   |      |   |  |  |  |  |  |
| 11     | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9   |      |   |  |  |  |  |  |
|        | 5.8%  |      |   |  |  |  |  |  |
|        |   |      |   |  |  |  |  |  |
| 12     | 2 TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)   |      |   |  |  |  |  |  |
|        | HC, IN  |      |   |  |  |  |  |  |
|        |   |      |   |  |  |  |  |  |

| 1  | NAMES OF REPORTING PERSONS  |                                  |  |  |  |  |  |  |
|----|---|----------------------------------|--|--|--|--|--|--|
|    | I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)                               |                                  |  |  |  |  |  |  |
|    |   |                                  |  |  |  |  |  |  |
|    | RA Capital Healt  | RA Capital Healthcare Fund, L.P. |  |  |  |  |  |  |
| 2  | CHECK THE AP  | PROPRIA                          | TE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS) |  |  |  |  |  |
| -  | CHECK HE /  | I ROI RII I                      | $(a) \square$                                    |  |  |  |  |  |
|    |   |                                  |  |  |  |  |  |  |
|    | (b) 🗆   |                                  |  |  |  |  |  |  |
| 3  | SEC USE ONLY  |                                  |  |  |  |  |  |  |
|    |   |                                  |  |  |  |  |  |  |
| 4  | CITIZENSHIP OR PLACE OF ORGANIZATION  |                                  |  |  |  |  |  |  |
|    | Delaware  |                                  |  |  |  |  |  |  |
|    |   |                                  |  |  |  |  |  |  |
|    |   | 5                                | SOLE VOTING POWER                                |  |  |  |  |  |
|    |   |                                  |  |  |  |  |  |  |
| NI | UMBER OF  |                                  | 0  |  |  |  |  |  |
|    | SHARES  | 6                                | SHARED VOTING POWER                              |  |  |  |  |  |
|    |   |                                  |  |  |  |  |  |  |
|    | NEFICIALLY  |                                  | 3,203,941  |  |  |  |  |  |
| 0  | WNED BY<br>EACH   | 7                                | SOLE DISPOSITIVE POWER                           |  |  |  |  |  |
| R  | EPORTING  | /                                | SOLE DISPOSITIVE FOWER                           |  |  |  |  |  |
|    |   |                                  | 0  |  |  |  |  |  |
|    | PERSON  |                                  |  |  |  |  |  |  |
|    | WITH:   | 8                                | SHARED DISPOSITIVE POWER                         |  |  |  |  |  |
|    |   |                                  | 3,203,941  |  |  |  |  |  |
| 9  | AGGREGATE A   | MOUNT F                          | BENEFICIALLY OWNED BY EACH REPORTING PERSON      |  |  |  |  |  |
| -  |   |                                  |  |  |  |  |  |  |
|    | 3,203,941   |                                  |  |  |  |  |  |  |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS) □ |                                  |  |  |  |  |  |  |
| 11 | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9   |                                  |  |  |  |  |  |  |
|    | 5 20/   |                                  |  |  |  |  |  |  |
|    | 5.3%  |                                  |  |  |  |  |  |  |
| 12 | 2 TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)   |                                  |  |  |  |  |  |  |
|    | PN  |                                  |  |  |  |  |  |  |
|    |   |                                  |  |  |  |  |  |  |
|    | 1   |                                  |  |  |  |  |  |  |

## Item 1(a). Name of Issuer:

CytomX Therapeutics, Inc. (the "Issuer")

#### Item 1(b). Address of Issuer's Principal Executive Offices:

151 Oyster Point Blvd., Suite 400, South San Francisco, CA 94080

## Item 2(a). <u>Names of Persons Filing</u>:

The names of the persons filing this report (collectively, the "Reporting Persons") are: RA Capital Management, L.P. ("RA Capital") Peter Kolchinsky Rajeev Shah

RA Capital Healthcare Fund, L.P. (the "Fund")

## Item 2(b). Address of Principal Business Office or, if None, Residence:

The address of the principal business office of each of the Reporting Persons is:

c/o RA Capital Management, L.P., 200 Berkeley Street, 18th Floor, Boston MA 02116

## Item 2(c). <u>Citizenship</u>:

RA Capital and the Fund are Delaware limited partnerships. Dr. Kolchinsky and Mr. Shah are United States citizens.

#### Item 2(d). <u>Title of Class of Securities</u>:

Common stock, par value \$0.00001 per share ("Common Stock")

#### Item 2(e). <u>CUSIP Number</u>:

23284F105

# Item 3. If this statement is filed pursuant to §§ 240.13d-1(b) or 240.13d-2(b) or (c), check whether the person filing is a:

Not applicable.

# Item 4. <u>Ownership</u>.

The information required by this item with respect to each Reporting Person is set forth in Rows 5 through 9 and 11 of the cover pages to this Schedule 13G. The ownership percentages reported are based on 60,509,116 outstanding Common Stock, as reported in the Issuer's Prospectus Supplement filed on January 21, 2021.

The Fund directly holds 3,203,941 shares of Common Stock. A separately managed account (the "Account") holds 296,059 shares of Common Stock.

RA Capital Healthcare Fund GP, LLC is the general partner of the Fund. The general partner of RA Capital is RA Capital Management GP, LLC, of which Dr. Kolchinsky and Mr. Shah are the controlling persons. RA Capital serves as investment adviser for the Fund and the Account and may be deemed a beneficial owner, for purposes of Section 13(d) of the Securities Exchange Act of 1934 (the "Act"), of any securities of the Issuer held by the Fund and the Account. The Fund has delegated to RA Capital the sole power to vote and the sole power to dispose of all securities held in the Fund's portfolio, including the shares of the Issuer's Common Stock reported herein. Because the Fund has divested voting and investment power over the reported securities it holds and may not revoke that delegation on less than 61 days' notice, the Fund disclaims beneficial ownership of the securities it holds for purposes of Section 13(d) of the Act. As managers of RA Capital, Dr. Kolchinsky and Mr. Shah may be deemed beneficial owners, for purposes of Section 13(d) of the Act, of any securities reported in this Schedule 13G Statement (the "Statement") other than for the purpose of determining their obligations under Section 13(d) of the Act, and the filing of the Statement shall not be deemed an admission that either RA Capital, Dr. Kolchinsky, or Mr. Shah is the beneficial owner of such securities for any other purpose.

## Item 5. <u>Ownership of Five Percent or Less of a Class</u>.

If this statement is being filed to report the fact that as of the date hereof the Reporting Persons have ceased to be the beneficial owner of more than five percent of the class of securities, check the following  $\Box$ .

## Item 6. <u>Ownership of More than Five Percent on Behalf of Another Person</u>.

Not applicable.

# Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on by the Parent Holding Company or Control Person.

Not applicable.

#### Item 8. <u>Identification and Classification of Members of the Group</u>.

Not applicable.

## Item 9. <u>Notice of Dissolution of Group</u>.

Not applicable.

#### Item 10. <u>Certification</u>.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect, other than activities solely in connection with a nomination under § 240.14a-11.

# **SIGNATURE**

After reasonable inquiry and to the best of its knowledge and belief, each of the undersigned certifies that the information set forth in this statement is true, complete and correct.

Date: January 29, 2021

RA CAPITAL MANAGEMENT, L.P.

By: /s/ Peter Kolchinsky Name: Peter Kolchinsky Title: Authorized Signatory

PETER KOLCHINSKY

/s/ Peter Kolchinsky

RAJEEV SHAH

/s/ Rajeev Shah

RA CAPITAL HEALTHCARE FUND, L.P.

By: RA Capital Healthcare GP, LLC

By: /s/ Peter Kolchinsky

Name: Peter Kolchinsky Title: Manager

#### AGREEMENT

This Joint Filing Agreement, dated as of January 29, 2021, is by and among RA Capital Management, L.P., Peter Kolchinsky, Rajeev Shah, and RA Capital Healthcare Fund, L.P. (the foregoing are collectively referred to herein as the "Filers").

Each of the Filers may be required to file with the United States Securities and Exchange Commission a statement on Schedule 13G and/or 13D with respect to Common Stock, par value \$0.00001 per share of CytomX Therapeutics, Inc. beneficially owned by them from time to time.

Pursuant to and in accordance with Rule 13(d)(1)(k) promulgated under the Securities Exchange Act of 1934, as amended, the Filers hereby agree to file a single statement on Schedule 13G and/or 13D (and any amendments thereto) on behalf of each of such parties, and hereby further agree to file this Joint Filing Agreement as an exhibit to such statement, as required by such rule.

This Joint Filing Agreement may be terminated by any of the Filers upon one week's prior written notice or such lesser period of notice as the Filers may mutually agree.

Executed and delivered as of the date first above written.

## RA CAPITAL MANAGEMENT, L.P.

By: /s/ Peter Kolchinsky Name: Peter Kolchinsky Title: Authorized Signatory

PETER KOLCHINSKY

/s/ Peter Kolchinsky

RAJEEV SHAH

/s/ Rajeev Shah

#### RA CAPITAL HEALTHCARE FUND, L.P.

By: RA Capital Healthcare GP, LLC

By: /s/ Peter Kolchinsky Name: Peter Kolchinsky Title: Manager