SEC Form 4	
FORM	4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See
Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a

contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPRO	JVAL						
OMB Number:	3235-0287						
Estimated average burden							
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	atisfy the affirmative ditions of Rule 10b5- truction 10.			
1. Name and Ad Barone Fra	dress of Reporting INCESCA	J Person <sup>*</sup>	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Candel Therapeutics</u> , Inc. [ CADL ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify below) below)
(Last) (First) (Middle) C/O CANDEL THERAPEUTICS, INC. 117 KENDRICK ST., SUITE 450			3. Date of Earliest Transaction (Month/Day/Year) 01/08/2025	Chief Scientific Officer
(Street) NEEDHAM	MA	02494	4. If Amendment, Date of Original Filed (Month/Day/Year)	<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>
(City)	(State)	(Zip)		

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities A Disposed Of (			5. Amount of Securities Beneficially Owned Following		Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	01/08/2025		S		13,673(1)	D	\$8.2182	124,207	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(e.g., pt	113, 00	ans, 1	varie	anto,	options, t		10 30	cunties	)				
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)		Transaction Code (Instr. 8) (Acquir (A) or Dispos of (D) (Instr.		Transaction Code (Instr. 8) Acquired (A) or Disposed		f Expiration Date (Month/Day/Year) S ecurities c.cquired A) or isposed f (D) nstr. 3, 4		and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		mount of ecurities nderlying erivative ecurity (Instr. 5)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

### Explanation of Responses:

1. The sales reported on this Form 4 represent shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting and settlement of restricted stock units pursuant to the Issuer's mandatory sell to cover policy, which requires sales in an amount sufficient to cover tax withholding obligations associated with the vesting events, and the sales do not represent discretionary sales by the Reporting Person.

## /s/ Charles Schoch, as Attorney-in-Fact for Francesca 01/10/2025

Barone

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.