FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	DC	20549	
vasiliigion,	D.C.	20349	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
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hours per response	: 0.5										

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

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* Gaeta Renee					2. Issuer Name and Ticker or Trading Symbol Candel Therapeutics, Inc. [CADL]							(Ch	Relationship leck all appli X Directo	cable)	g Pers	son(s) to Iss 10% Ow		
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/28/2023								Officer below)	(give title		Other (s below)	pecify
C/O CANDEL THERAPEUTICS, INC.				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
117 KENDRICK ST., SUITE 450													ine) X Form filed by One Reporting Person					
(Street)	AM M	A	02494											Form t	iled by More า	e than	one Repo	rting
					- Ru	le î	10b5-	1(c	Transaction Indication									
(City)	(S	tate)	(Zip)			Check this box to indicate that a transaction was made pursuant to a co satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruc												
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			action	2A. Deemed Execution Date,		3. 4. Securit Transaction Disposed Code (Instr. 5)		rities Acquired (A) c ed Of (D) (Instr. 3, 4		5. Amou Securiti Benefic	nt of 6. es Fo (D) Following (I)	Form (D) or	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) o (D)	r Price	Transac (Instr. 3	tion(s)			(Instr. 4)		
	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)	tive Conversion Date Execution Date, ty or Exercise (Month/Day/Year) if any				ransaction of ode (Instr. Derivative			Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		cpiration ate	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$1.22	06/28/2023			A		14,240		(1)	06	6/28/2033	Common Stock	14,240	\$0.00	14,240		D	

Explanation of Responses:

1. This option is subject to time-based vesting. The shares underlying this option shall vest and become exercisable upon the earlier of (i) June 28, 2024 or (ii) the date of the next Annual Meeting of Stockholders of the Issuer; provided, however, that all vesting shall cease if the Reporting Person resigns from the Board of Directors (the "Board") of the Issuer or otherwise ceases to serve as a director, unless the Board determines that the circumstances warrant continuation of vesting.

Remarks:

/s/ Jason A. Amello, as Attorney-In-Fact for Renee Gaeta

** Signature of Reporting Person

06/29/2023

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.