FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

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* Ragan Paula				2. Issuer Name and Ticker or Trading Symbol X4 Pharmaceuticals, Inc [XFOR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
												X	Direc	tor	10% Owner		vner		
(Last)	(F	irst) (I	Middle)		3. Da	Date of Earliest Transaction (Month/Day/Year)								X	Office belov	er (give title v)		Other (specify below)	
C/O X4 PHARMACEUTICALS, INC.			09/09/2020								President and CEO								
955 MASSACHUSETTS AVENUE, 4TH FLOOR																			
			4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)									
(Street) CAMBRIGE MA 02139											X Form filed by One Reporting Per					on			
	10L IV												Form filed by More than One Reporting Person						
(City)	(\$	itate) (2	Zip)			reisuil									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Securi Benefi		ties cially I Following	6. Owners Form: Dir (D) or Ind (I) (Instr.	ect irect l)	7. Nature of Indirect Beneficial Ownership					
							Code V		Amount	(A) (D)	or Pr	ice	Transa	ansaction(s) nstr. 3 and 4)			(Instr. 4)		
Common Stock 09/09/20				2020				S ⁽¹⁾		8,840 ⁽²⁾ D \$		8.04(3)	287,323(4)		D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security 1. Title of Conversion or Exercise Price of Derivative Security 1. Title of Conversion Date (Month/Day/Year) 2. Transaction Date (Execution Date, if any (Month/Day/Year)			ion Date,	4. Transaction Code (Instr. 8) 5. Nur Geriva Secur Acqui (A) or Dispo of (D) (Instr. and 5		rative rities rired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)				9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Direc or In (I) (Ir		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

- 1. The reported transaction was effected pursuant to a Rule 10b5-1 trading plan.
- 2. Sale of shares to cover personal income tax obligation upon settlement of restricted stock unit award.
- 3. The price reported is a weighted average price. These shares were sold in multiple transactions ranging from \$7.56 to \$8.96, inclusive. The Reporting Person undertakes to provide the Company, any security holder of the Company or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.
- 4. Of the shares of common stock reported, 101,714 shares represent unvested restricted stock units.

Remarks:

/s/ Derek M. Meisner, 09/10/2020 attorney-in-fact

** 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.