FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									
l	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).

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

1. Name and Address of Reporting Person* Mostafa Adam S.						2. Issuer Name and Ticker or Trading Symbol X4 Pharmaceuticals, Inc [XFOR]									k all app Direc	olicable) etor	ing Person(s) to		wner
(Last)	(Last) (First) (Middle) C/O X4 PHARMACEUTICALS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 06/23/2023							X	belov	ficer (give title slow) Chief Financi		Other (s below) Officer	specily
61 NORTH BEACON STREET, 4TH FLOOR						4. If Amendment, Date of Original Filed (Month/Day/Year)							· .	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) BOSTO	Street) BOSTON MA 02134													X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day)					Execution Date,		ate,	Transaction Disposed O Code (Instr. 5)			es Acquired (A) Of (D) (Instr. 3,				cially 1	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) (D)	or Price	е	Reported Transaction(s) (Instr. 3 and 4)		Ì			
Common	023			S ⁽¹⁾		5,417	D	\$1.9	93 ⁽²⁾	3 ⁽²⁾ 82,862 ⁽³⁾		B) D							
		Tab	le II -	Derivativ (e.g., pu										•	Owne	ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion or Exercise (Month/Day/Year) Execution Date, or Exercise Price of Derivative Execution Date, if any (Month/Day/Year) S)			5. Numl of Deriv Secu Acqu (A) o Dispo of (D) (Instr and 5	rative rities nired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		Der Sec (Ins	ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code		(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares	r					

Explanation of Responses:

- 1. The reported transaction was effected pursuant to a Rule 10b5-1 trading plan.
- 2. The price reported is a weighted average price. These shares were sold in multiple transactions ranging from \$1.90 to \$1.96 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.
- 3. Represents restricted stock units.

Remarks:

<u>/s/ Paula Ragan, attorney-in-</u> fact

06/26/2023

<u>ract</u>

** 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.