The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

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

Notice of Exempt Offering of Securities

## OMB APPROVAL OMB 3235-Number: 0076 Estimated average burden hours per 4.00 response:

1. Issuer's Identity

CIK (Filer ID Nu	mber) Previous Names	None	Entity Type
0001501697	Arsanis, Inc.		X Corporation
Name of Issue			Limited Partnership
X4 Pharmaceuticals, Inc			Limited Liability Company
Jurisdiction of	of		General Partnership
Incorporation/Orga	nization		Business Trust
DELAWARE			Other (Specify)
Year of Incorpora	tion/Organization		
X Over Five Years Ago			
Within Last Five Years (	Specify Year)		
Yet to Be Formed			
2. Principal Place of Busines	ss and Contact Information		
Name	of Issuer		
X4 Pharmaceuticals, Inc			
Street A	Address 1	Sti	reet Address 2
61 NORTH BEACON STR	EET	4TH FLOOR	
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
BOSTON	MASSACHUSETTS	02134	857-529-8300
3. Related Persons			
Last Name	Firs	at Name	Middle Name
Ragan	Paula		
Street Address 1	Street	Address 2	
61 North Beacon Street	4th Floor		
City		vince/Country	ZIP/PostalCode
Boston	MASSACHUSE	TTS 021	34
Relationship: X Executive	Officer X Director Promo	ter	
Clarification of Response (if	Necessary):		
Last Name	Firs	st Name	Middle Name
Mostafa	Adam	S.	
Street Address 1	Street	Address 2	
61 North Beacon Street	4th Floor		
City	State/Prov	vince/Country	ZIP/PostalCode
Boston	MASSACHUSE	TTS 021	34

Relationship: X Executive Officer Director Promoter

Clarification of Response (if Necessary):

Chief Financial Officer and Treasurer

Last Name	First Name	Middle Name
DiBiase Street Address 1 61 North Beacon Street City Boston D Latin Lie M En of 2007	Mary Street Address 2 4th Floor State/Province/Country MASSACHUSETTS	<b>ZIP/PostalCode</b> 02134
	Director Promoter	
Clarification of Response (if Necessa	ry):	
Chief Operating Officer		
Last Name Cadavid Street Address 1 61 North Beacon Street	First Name Diego Street Address 2 4th Floor	Middle Name
Clarification of Response (if Necessa	State/Province/Country MASSACHUSETTS Director Promoter ry):	ZIP/PostalCode 02134
Chief Medical Officer		
Last Name Taveras Street Address 1 61 North Beacon Street City Boston	First Name Arthur Street Address 2 4th Floor State/Province/Country MASSACHUSETTS	Middle Name ZIP/PostalCode 02134
Relationship: X Executive Officer	Director Promoter	
Clarification of Response (if Necessa Chief Scientific Officer	ry):	
Last Name Meisner Street Address 1 61 North Beacon Street City Boston	First Name Derek Street Address 2 4th Floor State/Province/Country MASSACHUSETTS	Middle Name ZIP/PostalCode 02134
Relationship: X Executive Officer	Director Promoter	
Clarification of Response (if Necessa	ry):	
Chief Legal Officer and Corporate Se	cretary	
Last Name Aliski Street Address 1 61 North Beacon Street	First Name William Street Address 2 4th Floor State/Province/Country	Middle Name E. ZIP/PostalCode
City Boston Relationship: Executive Officer X	MASSACHUSETTS	02134
Clarification of Response (if Necessa	ry):	

Last Name	First Name	Middle Name
Lawton	Alison	
Street Address 1	Street Address 2	
61 North Beacon Street	4th Floor	
City	State/Province/Country	ZIP/PostalCode
Boston	MASSACHUSETTS	02134
Relationship: Executive Officer	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Bridger	Gary	J.
Street Address 1	Street Address 2	
61 North Beacon Street	4th Floor	
City	State/Province/Country	ZIP/PostalCode
Boston	MASSACHUSETTS	02134
Relationship: Executive Officer	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
de Craecker	Francoise	
Street Address 1	Street Address 2	
61 North Beacon Street	4th Floor	
City	State/Province/Country	ZIP/PostalCode
Boston	MASSACHUSETTS	02134
Relationship: Executive Officer	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Stewart	Murray	W.
Street Address 1	Street Address 2	
61 North Beacon Street	4th Floor	
City	State/Province/Country	ZIP/PostalCode
Boston	MASSACHUSETTS	02134
Relationship: Executive Officer	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
McGirr	David	
Street Address 1	Street Address 2	
61 North Beacon Street	4th Floor	
City	State/Province/Country	ZIP/PostalCode
Boston	MASSACHUSETTS	02134
Relationship: Executive Officer	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Wyzga	Michael	S.
Street Address 1	Street Address 2	
61 North Beacon Street	4th Floor	
City	State/Province/Country	ZIP/PostalCode
	÷	
Boston	MASSACHUSETTS	02134

## Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

# 4. Industry Group

Agriculture		Health Care	Retailing
Banking & Financia	l Services	X Biotechnology	Restaurants
Commercial Bank Insurance	king	Health Insurance	Technology
Investing		Hospitals & Physicians	Computers
Investment Banki	ng	Pharmaceuticals	Telecommunications
Pooled Investmen	t Fund	Other Health Care	Other Technology
Is the issuer regist		Manufacturing	Travel
an investment con the Investment Co		Real Estate	Airlines & Airports
Act of 1940?	Jiipany	Commercial	Lodging & Conventions
Yes	No	Construction	Tourism & Travel Services
Other Banking &	Financial Services	<b>REITS &amp; Finance</b>	Other Travel
Business Services		Residential	Other
Energy		Other Real Estate	
Coal Mining			
Electric Utilities			
Energy Conservat	tion		
Environmental Se	ervices		
Oil & Gas			

5. Issuer Size

Other Energy

<b>Revenue Range</b>	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

	Investment Company Act Section 3(c)		
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)	
Rule 504 (b)(1)(i)	Section 3(c)(2)	Section 3(c)(10)	
Rule 504 (b)(1)(ii)	Section $3(c)(3)$	Section 3(c)(11)	
Rule 504 (b)(1)(iii) X Rule 506(b)	Section 3(c)(4)	Section 3(c)(12)	
Rule 506(c)	Section $3(c)(5)$	Section $3(c)(13)$	
Securities Act Section 4(a)(5)	Section 3(c)(6)	Section $3(c)(14)$	
	Section 3(c)(7)		

7. Type of Filing		
X New Notice Date of First Sale 2022-07-06 First Sa Amendment	le Yet to Occur	
8. Duration of Offering		
Does the Issuer intend this offering to last more than one	year? Yes X No	
9. Type(s) of Securities Offered (select all that apply)		
<ul> <li>X Equity Debt</li> <li>X Option, Warrant or Other Right to Acquire Another Sec X Security to be Acquired Upon Exercise of Option, War Other Right to Acquire Security</li> </ul>		
10. Business Combination Transaction		
Is this offering being made in connection with a business as a merger, acquisition or exchange offer?	combination transaction, such Yes X No	
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside investor	\$0 USD	
12. Sales Compensation		
Recipient	Recipient CRD Number None	
Stifel, Nicolaus & Company, Inc.	793	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number	K None
None	None	
Street Address 1	Street Address 2	
One South Street, 15th Floor		
City	State/Province/Country	ZIP/Postal Code
Baltimore	MARYLAND	21202
State(s) of Solicitation (select all that apply)AllCheck "All States" or check individualStates	Foreign/non-US	
CONNECTICUT ILLINOIS MARYLAND		

13. Offering and Sales Amounts

MASSACHUSETTS

NEW YORK

Total Offering Amount	\$111,526,550 USD or	Indefinite
Total Amount Sold	\$55,749,999 USD	
Total Remaining to be Sold	\$55,776,551 USD or	Indefinite

Clarification of Response (if Necessary):

"Total Offering Amount" includes amounts receivable by the Issuer upon the exercise of certain warrants to purchase the Issuer's Common Stock (assuming no cashless exercise).

### 14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

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### 15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$2,800,000 USD X Estimate	e
Finders' Fees	\$0 USD Estimat	e

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.\*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Rule 504 or Rule 506 for one of the reasons stated in Rule 504(b)(3) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
X4 Pharmaceuticals, Inc	/s/ Adam Mostafa	Adam Mostafa	Chief Financial Officer	2022-07-19

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.

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a

result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.