

# CANDEL THERAPEUTICS, INC. Reported by

# AGUILAR LAURA K.

### FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 10/15/24 for the Period Ending 10/11/24

Address 117 KENDRICK STREET

SUITE 450

NEEDHAM, MA, 02494

Telephone 617-916-5445

CIK 0001841387

Symbol CADL

SIC Code 2836 - Biological Products, (No Diagnostic Substances)

Industry Biotechnology & Medical Research

Sector Healthcare

Fiscal Year 12/31

## FORM 4

☐ 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 that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Aguilar-Core	dova Est	uardo		C	and	el The	rapeuti	ics,	Inc. [	CADL	1					
I Igunui Cordo (a Estadra)					3. Date of Earliest Transaction (MM/DD/YYYY)							Director		_X_ 10	% Owner	
(Last) (First) (Middle)					5. Date of Earnest Transaction (MM/DD/1111)							Officer (gi	Officer (give title below) Other (specify below)			
160 PAULSO									024							
	(Stre	et)		4.	If An	nendme	nt, Date (	Origi	nal File	d (MM/DI	D/YYY	Y) 6. Individual	or Joint/G	roup Filing	(Check App	licable Line)
WABAN, MA	A 02468											Form filed by			- D	
(C	city) (Sta	te) (Zi	p)									X Form filed	by More than	One Reporting	g Person	
			Table I	- Non-De	rivati	ive Sec	urities Ac	quir	ed, Dis	sposed o	f, or B	Beneficially Own	ed			
1.Title of Security				Trans. Date		Deemed	3. Trans. Co	_		rities Acqui				lly Owned	6.	7. Nature of
(Instr. 3)					Execution Date, if any		(Instr. 8)		or Disposed of (D) (Instr. 3, 4 and 5)		. ,	Following Reported 7 (Instr. 3 and 4)		Form: Direct (D)	Indirect Beneficial Ownership	
							Code	v	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
CADL			1	10/11/2024			S		15,000	D	\$6.05			944,873	D	
CADL			1	10/14/2024			S		15,000		\$6.02			929,873	D	
CADL			1	10/15/2024			S		10,412	D	\$6.03			919,461	D	
CADL														2,074,942	I	By Estuardo Aguilar- Cordova 2020 Irrevocable Trust
CADL														2,013,100	I	By Laura K. Aguilar 2020 Irrevocable Trust (1)
CADL														874,943	I	By LKA 2022 revocable trust (2)
CADL														171,335 (3)	D	
	Tab	le II - Dei	rivative S	Securities	Bene	eficially	Owned	(e.g.,	puts,	calls, wa	rrant	s, options, conve	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Exec	3A. Deem Execution Date, if an	(Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		s and Dat		on Date  Expiration	Securit Deriva (Instr.	e and Amount of ties Underlying tive Security 3 and 4)	Inderlying Derivative Security (Instr. 5)  ant or Number of		10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial
				Code	V	(A)	(D)	Exe	ercisable	Date	11110	Shares		(Instr. 4)	4)	

#### **Explanation of Responses:**

- (1) Shares of common stock held by spouse irrevocable trust
- (2) Shares of common stock held by spouse LKA 2022 revocable trust
- (3) Shares of common stock held jointly with spouse

#### **Reporting Owners**

Danastina Oyuman Nama / Addusas	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Aguilar-Cordova Estuardo					
160 PAULSON RD		X			
WABAN, MA 02468					
Aguilar Laura K.					
160 PAULSON RD		X			
WABAN, MA 02468					

#### **Signatures**

Estuardo Aguilar-Cordova	10/15/2024		
**Signature of Reporting Person	Date		
Laura K. Aguilar	10/15/2024		
**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 control number.