FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Vashington,	D.C.	20549
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STATEMENT	OF	<b>CHANGES</b>	IN E	BENEFIC	IAL	<b>OWNER</b>	SHIP
• ., —						•	•

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
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* <u>Siegel Jolie</u>			2. Issuer Name <b>and</b> Ticker or Trading Symbol C4 Therapeutics, Inc. [ CCCC ]					5. Relationship of Reporting Person(s) to Issu (Check all applicable)  Director 10% Own				ner				
(Last)	•	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/18/2023					)	X Officer (give title Other (specify below)  Chief Legal Officer				pecity	
C/O C4 THERAPEUTICS, INC. 490 ARSENAL WAY #120				4. If Amendment, Date of Original Filed (Month/Day/Year)				Line)	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) WATER	ΓOWN M	ΙA	02472							2	X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(S	tate)	(Zip)		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.								o satisfy			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			2A. Deemed Execution Date if any (Month/Day/Yea		e, Transaction Disposed C Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 an		5. Amount of Securities Beneficially Owned Followin Reported		Form	: Direct I r Indirect E str. 4) (	7. Nature of ndirect Beneficial Dwnership Instr. 4)			
							Code	/ Amount	(A) o (D)	r Price	Transacti (Instr. 3 a	on(s)				
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)	Derivative Conversion Date Execution Date, To Courty or Exercise (Month/Day/Year) if any		Cod	ansaction bde (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Cod	le V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	on(s)		
Stock Option (Right to Buy)	\$2.15	09/18/2023		A		120,000		(1)	09/17/2033	Common Stock	120,000	\$0	120,00	00	D	

## **Explanation of Responses:**

 $1.\ This\ option\ shall\ vest\ in\ full\ on\ September\ 18,\ 2025,\ subject\ to\ the\ Reporting\ Person's\ continued\ service\ on\ such\ date.$ 

## Remarks:

/s/ Jolie M. Siegel

09/19/2023

\*\* Signature of Reporting Person

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.