Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | D.C. 20549 |
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| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT OF CHA |
|--|------------------|
| obligations may continue. See | |

NGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
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| 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

| 1. Name and Address of Reporting Person Elsbree David B | | | | | T2 Biosystems, Inc. [TTOO] | | | | | | | | | | (Che | (Check all applicable) X Director 10% Owner | | | | | | |
|---|---|--|---|--------|---|--|----------------------|--|--|----------|---|------------------|--|-----------------|--|--|------------------------------------|---|--|--|--|--|
| (Last) | | irst) | (Middle) | | | 3. Date of Earliest Transaction (N 06/07/2019 | | | | | (Month/Day/Year) | | | | | _ | er (give title | | Other (s below) | | | |
| (Street) | GTON M | IA | 02421 | | 4.1 | 4. If Amendment, Date of Orig | | | | | f Original Filed (Month/Day/Year) | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) | (9 | itate) | (Zip) | | | | | | | | | | | | | Pers | on | | | | | |
| | | Tak | le I - Nor | ı-Deri | vativ | e Se | curities | s Ac | quir | ed, D | isp | osed o | f, or | Ben | eficiall | y Owne | d | | | | | |
| | | 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | , Τι C | Transaction Disposi Code (Instr. 5) | | | urities Acquired (A) o sed Of (D) (Instr. 3, 4 | | | Benefi Owned | ies cially Following | Form (D) o | n: Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | С | ode | / | Amount | | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | |
| Common | Stock | | | 06/0 | 08/201 | .9 | | | | M | | 9,000 | 0 | A | A (1) 86,708 | | | | D | | | |
| Common | Stock | | | | | | | | | | | | | | | 10,000 I By spot | | | By spouse ⁽²⁾ | | | |
| | | | Table II - | | | | urities . s, warr | | | | | | | | | Owned | | • | , | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution E if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercis Expiration Date (Month/Day/Yea | | ate | | 7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4) | | s Security | 8. Price o Derivative Security (Instr. 5) | | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exer | cisable | | kpiration ate | Title | | Amount or Number of Shares | | | | | | | |
| Restricted Stock Units | (1) | 06/08/2019 | | | M | | 9,000 | | | (3) | | (3) | Comr | | 9,000 | \$0.00 | 9,00 | 0 | D | | | |
| Stock Option (Right to | \$1.54 | 06/07/2019 | | | A | | 22,000 | | | (4) | 06 | 5/07/2029 | Comr | | 22,000 | \$0.00 | 22,00 | 00 | D | | | |

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.
- 2. The reporting person disclaims ownership of these securities and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.
- 3. On June 8, 2018 the reporting person was granted 9,000 restricted stock units that vested on June 8, 2019.
- 4. The stock option vests and becomes exercisable in 12 substantially equal monthly installments commencing June 7, 2019.

Remarks:

/s/ John Sprague, Attorney-in-06/11/2019 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.