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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	APPROVAL					
OMB Number:	3235-0287					
Estimated average burden						
hours per resp	onse: 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 <sup>*</sup> Giffin Brett A.				2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>T2 Biosystems, Inc.</u> [ TTOO ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (spec				
(Last) (First) (Middle) 101 HARTWELL AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 02/20/2023							below)	.0	belo belo	w)	
(Street) LEXINC				4. If Amendment, Date of Original Filed (Month/Day/Year) 03/09/2023							dividual or Joint/Group Filing (Check Applicable ) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S		(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 interstatisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							nded to			
						curities Acq	·	Disp		·		-			
Date			(Month/Day/Year)		2A. Deemed Execution Date.	3. Transaction Code (Instr. 8)					4 and Securities Beneficially Owned Followi		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
				(Month/Day		f any Month/Day/Year)	Code (					Owned	ally Following	(D) or Indired	Beneficial Ownership
				(Month/Day		fany	Code (			(A) or (D)	Price	Benefici Owned Reporte Transac (Instr. 3	ally <sup>-</sup> ollowing d tion(s)	(D) or Indired	Beneficial
Common	Stock			(Month/Day 02/20/2	(	fany	Code ( 8)	Instr.	5)	(A) or (D)	-	Owned Reporte Transac (Instr. 3	ally <sup>-</sup> ollowing d tion(s)	(D) or Indired	Beneficial Ownership
Common					2023	fany	Code ( 8) Code	Instr.	5) Amount	(A) or (D)	Price	Owned Reporte Transac (Instr. 3 3,5	ally Following d tion(s) and 4)	(D) or Indirec (I) (Instr. 4)	Beneficial Ownership
		T	able II - D	02/20/2 02/20/2 Perivativ	2023 2023 //e Secu	fany	Code ( 8) Code M S <sup>(3)</sup> red, D	v v Dispc	5) Amount 1,333 537 osed of,	(A) or (D) A D , or Bene	Price (1) \$0.6 sticially	Owned I Reporte Transac (Instr. 33,553,5	ally Following d tion(s) and 4) 86 <sup>(2)</sup>	(D) or Indirec (I) (Instr. 4)	Beneficial Ownership

## Amount or Number Date Exercis Expiration Date of v (A) (D) Title Shares Code Restricted Common (1) 02/20/2023 (4) (4) 1,333 1.333 2,667 D м \$<mark>0</mark> Stock Units Stock

and 5)

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.

2. The original Form 4 filed on March 9, 2023 is amended by this Form 4 amendment to correct the amount of securities beneficially owned following the reported transactions.

3. The transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person adopted by the reporting person on November 10, 2021.

4. On February 20, 2022 the reporting person was granted 4,000 RSU's that vest in three equal annual installments commencing on February 20, 2023.

/s/ John Sprague, Attorney-infact <u>11/28/2023</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.