FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF (CHANGES	IN	BENEFICIAL	OWNERSHIP
	U. \				CITILITIES

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

1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol T2 Biosystems, Inc. [TTOO]									Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Sprague John M					1	12 Diosystems, me. [1100]										Direct	or		10% Ov	vner	
						Date of Earliest Transaction (Month/Day/Year)									\dashv	X Office below	r (give title)		Other (s below)	specify	
(Last)	•	,	(Middle)		02/	02/24/2024									Chief Financial Officer						
101 HAF	RTWELL A	VENUE			<u> </u>																
					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															- 1	,	filed by On	e Rep	orting Perso	n	
LEXING	TON M	1A	02421		_											Form Perso		re tha	n One Repo	rting	
(City) (State) (Zip)					Ru	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.																			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date			Code (Instr.					Benefic Owned	es ially Following	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)		Price	Transac	eported ransaction(s) nstr. 3 and 4)			(Instr. 4)		
Common Stock		02/24	4/2024	-/2024				М		29		A	(1)	1	141		D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
				· • · ·		Calls			·	<u> </u>			1		ilies	1	1			1	
1. Title of Derivative Security (Instr. 3) 3. Transaction Date Execution Date (Month/Day/Year) Gerivative Security 3. Transaction Date Execution Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)				Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Det						Amount or Number						
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title		of Shares						
Restricted Stock Units	(1)	02/24/2024			M			29		(2)		(2)	Comm		29	\$0	0		D		

Explanation of Responses:

- Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.
- 2. On February 24, 2021 the reporting person was granted 87 RSU's that vest in three equal installments commencing on February 24, 2022

/s/ Michael Gibbs, Attorney-infact 02/27/2024

** 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 Number.