FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL 3235-0287 Estimated average burden 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* SPRINGER TIMOTHY A						2. Issuer Name and Ticker or Trading Symbol Cartesian Therapeutics, Inc. [RNAC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 07/02/2024										Office below	er (give titl v)	e	Othe belo	r (speci w)	ify
36 WOODMAN ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CHESTNUT MA 02467														Form filed by One Reporting Person Form filed by More than One Reporting Person						
HILL WIT 02107				Rule 10b5-1(c) Transaction Indication																
(City)	ty) (State) (Zip)			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.															to	
		Table	I - Non	n-Deriva	tive	Secui	rities	Acc	quirec	d, Di	sposed of	, or E	Benefic	iall	y Own	ed				
Date				. Transactio Date Month/Day/		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (and Disposed Of (D) (Instr. 3			ıd	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o	Price		Reported Transact (Instr. 3 a	ion(s)			(Instr. 4	4)
Series B Non-Voting Convertible Preferred Stock 07/02/2)24	24		A		1,636,832	A	\$20	1,63		6,832	D				
Series B Non-Voting Convertible Preferred Stock				07/02/2024				A		721,361	A	\$20	721,361		,361		I	See Footn	See Footnote ⁽¹⁾	
Series B Non-Voting Convertible Preferred Stock 07/02/20)24	24			A		1,307	A	\$20	20 1,307			I	By wi	ife		
Common Stock													4,379,899		D					
Common Stock													1,927,630 I		I	See Footnote ⁽¹⁾				
Common Stock														3,493		I		By wife		
		Tal							-		oosed of, o			-	Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration I (Month/Day		ate	7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)				9. Number derivative Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	re Owners es Form: ally Direct (or Indir g (I) (Inst		nip of I Ber Ow ct (Ins	. Nature Indirect eneficial vnership str. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

1. Held by TAS Partners LLC. The reporting person is the managing member of TAS Partners LLC. The reporting person disclaims beneficial ownership of the securities held by TAS Partners LLC except to the extent of his pecuniary interest therein, if any.

Remarks:

/s/ Matthew Bartholomae,

Attorney-in-Fact for Timothy 07/05/2024

A. Springer

** 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.