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

OMB Number: 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* Flynn Sean C.						2. Issuer Name and Ticker or Trading Symbol Vericel Corp [VCEL]								5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% Own							
(Last) (First) (Middle) 64 SIDNEY STREET						3. Date of Earliest Transaction (Month/Day/Year) 07/16/2024								Officer (give title below) Chief Legal Officer							
(Street) CAMBRIDGE MA 02139					- 4.1	4. If Amendment, Date of Orig					ed (Month/Day/Year)			Individual or Joint/Group Filing (Check Applicable le) Form filed by One Reporting Person							
(City) (State) (Zip)					- 	ulo	10hE	1(0)	Trana	t	ion Ind	iootion		Form f Persor		e than (One Report	ing			
							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.														
		Tab	le I - No	n-Deri	vativ	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	neficial	y Owned							
1. Title of Security (Instr. 3) 2. Tran Date (Monti					action Day/Ye	ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		ed (A) or tr. 3, 4 and	Benefici	es ally Following	6. Own Form: (D) or I (I) (Inst	Direct c Indirect E tr. 4) C	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price	Transac	saction(s) r. 3 and 4)			instr. 4)			
Common Stock 07/16/					6/2024	2024			M		15,000 A		\$16.2	5 15,7	15,707(1)		D				
Common Stock 07/16/					6/2024	2024					15,000	D ⁽²⁾	\$52.1	8 70)7 ⁽¹⁾	I	D				
		•	Table II -								osed of, convertil			Owned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (8)				6. Date Exercisa Expiration Date (Month/Day/Year		of Securit		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e C S Illy C O	IO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares								
Stock Option (Right to	\$16.25	07/16/2024			M		15,000		(3)		11/04/2029	Common Stock	15,000	\$0	100,00	00	D				

Explanation of Responses:

- 1. These shares include shares acquired pursuant to the Issuer's 2015 Employee Stock Purchase Plan in transactions that were exempt under both Rule 16b-3(d) and Rule 16b-3(c).
- 2. The sales reported in this Form 4 were effected by an automatic sale pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 13, 2024.
- 3. These options, representing the right to purchase 150,000 shares, became exercisable on November 4, 2020, the first anniversary of the date of grant, with 25% vesting and the remaining 75% vesting in equal quarterly installments over three years thereafter, contingent upon continued service to the Company.

/s/ Sean Flynn

07/18/2024

** 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.