FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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*					2. Issuer Name <b>and</b> Ticker or Trading Symbol <b>eFFECTOR Therapeutics, Inc.</b> [ EFTR ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
WORLAND STEPHEN T						[ H III ]								X	Direc	tor		10% Ov	ner
(Last)		3. Date of Earliest Transaction (Month/Day/Year) 11/15/2023									belov	,		Other (s below)	pecify				
C/O EFF		11,15,2525								Chief Executive Officer									
142 NORTH CEDROS AVENUE, SUITE B					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X Form filed by One Reporting Person				
SOLANA BEACH	ANA CA 92075														Form filed by More than One Reporting Person				orting
Rule 10b5-1(c) Transaction Indication									on										
(City)	(Sta	ate) (Z	Zip)		Titalo 2000 2(0) Tranoaction maloation														
											saction was m ions of Rule 1					uction or writt	en pla	n that is inter	ided to
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	uired	l, Dis	posed of	, or E	Benefic	cially	Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day				/Year) Execu		eemed ution Date, th/Day/Year)		Transaction Disposed O Code (Instr. 5)			s Acquired (A) of (D) (Instr. 3, 4		and Secur Benef		cially I Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) o (D)	Price	)	Transaction(s) (Instr. 3 and 4)				,iiisti. 4)			
Common	Stock		11/15/2023				3		A		5,979(1)	A	\$0.4	1973	26	267,204		D	
Common Stock															56	52,339		I	By trust
		Tal	ole II								osed of,				Owne	d			
						tiis, v						1		Ť					1
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Dei Sed (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code		v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

 $1.\ These\ shares\ were\ acquired\ under\ the\ eFFECTOR\ The rapeutics,\ Inc.\ 2021\ Employee\ Stock\ Purchase\ Plan.$ 

## Remarks:

/s/ Michael Byrnes, Attorney-

in-Fact for Stephen T.

11/16/2023

**Worland** 

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.