FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549	
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STATEMENT	OF CHA	NGES IN	BENEFICI	AL OW	NERSHIP

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* HORNIG GEORGE						2. Issuer Name and Ticker or Trading Symbol Xometry, Inc. [ XMTR ]									all app	tor	ıg Per	10% Ov	wner		
(Last) (First) (Middle) C/O XOMETRY, INC.						3. Date of Earliest Transaction (Month/Day/Year) 07/05/2022										below	r (give title r)		Other (s	specify	
7529 STANDISH PLACE, SUITE 200					4. If <i>i</i>	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) DERWO	OD MI	D 20	085:	5											X Form filed by One Reporting Person Form filed by More than One Reporting Person					- 1	
(City)	(St	ate) (Z	Zip)																		
		Table	I - I	Non-Deriva	tive	Secui	rities	Ac	quir	ed, D	Disp	osed o	f, or I	Benefic	ially	Own	ed				
Date				2. Transaction Date (Month/Day/Ye	Execution		n Date,		3. Transaction Code (Instr. 8)						and 5) Sec Ber Ow		Amount of ecurities eneficially wned Following		n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								- [·	Code	v	Am	ount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(111511. 4)	
Class A Common Stock 0'				07/05/202	22				S <sup>(1)</sup>		1	1,548	D	\$32.77	'06 <sup>(2)</sup>	6 <sup>(2)</sup> 123,303			D		
Class A Common Stock 07/05/202				07/05/202	2 s <sup>(1)</sup> 8,452 D \$33.8				\$33.83	55(3)	11	4,851		D							
		Tat	ole I	II - Derivati (e.g., pu												)wne	t				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if ar	Deemed cution Date, ny nth/Day/Year)	4. Transaction Code (Instr. 8) 5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 and 5)				nber Expiration Date Expiration Date (Month/Day/Year) Security Underlyi Security Security Security 3 and 4)				unt of rities rlying rative rity (Instr.	Der Sec (Ins	rice of vative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(D)	Dat Exe	te ercisab		or Numb		Number	er							

## **Explanation of Responses:**

- 1. Represents shares sold in a transaction that was effected automatically pursuant to a Rule 10b5-1 trading plan adopted by the reporting person at least 30 days prior to the trading date.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$32.345 to \$33.19, inclusive. The reporting person undertakes to provide to Xometry, Inc., any security holder of Xometry, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnotes (2) and (3) to this Form 4.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$33.37 to \$34.21, inclusive.

## Remarks:

/s/ Kristie Scott, Attorney-in-

07/05/2022

**Fact** 

\*\* 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.