SEC Form 4	
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Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

Check this box if no longer subject	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
to Section 16. Form 4 or Form 5	
obligations may continue. See	

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

			O Jacuary Name and Ticken or Trading Ourshall	5 Deletionship of Demetion Demon						
1. Name and Address of Reporting Person		g Person [°]	2. Issuer Name and Ticker or Trading Symbol Xometry, Inc. [XMTR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
weymouth	<u>Katharine</u>		<u>Moneu y, me.</u> [Murre]	X Director 1	10% Owner					
(Last)	I		3. Date of Earliest Transaction (Month/Day/Year) 01/13/2024		Other (specify elow)					
C/O XOMETRY, INC. 6116 EXECUTIVE BLVD, SUITE 800			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicabl						
		SUITE 800		Line)						
				X Form filed by One Reporting Person						
(Street)				Form filed by More than One Person	e Reporting					
BETHESDA	MD	20852	Rule 10b5-1(c) Transaction Indication							
(City)	(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.							
		Table I - Non-De	rivative Securities Acquired, Disposed of, or Bene	ficially Owned						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction	2A. Deemed	3.		4. Securities			5. Amount of	6. Ownership	7. Nature of
······································	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4 and			Securities Beneficially Owned Following	Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Class A Common Stock	01/13/2024		G ⁽¹⁾		1,200	D	\$0.00	16,183	D	
Class A Common Stock	01/13/2024		G		1,200	A	\$0.00	1,200	I	by the Katharine Weymouth Revocable Trust
Class A Common Stock	01/17/2024		G ⁽¹⁾	1	1,200	D	\$0.00	14,983	D	
Class A Common Stock	01/17/2024		G		1,200	A	\$0.00	2,400	I	by the Katharine Weymouth Revocable Trust

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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)		of Deriv Secu Acqu (A) of Dispo of (D) (Instr						8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents the transfer by the Reporting Person of Class A common stock for no consideration to the Katharine Weymouth Revocable Trust for which the Reporting Person is the trustee. **Remarks:**



01/17/2024

** 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.