FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

IIILO 7	NID EXCITAINCE OF	•
Machinaton .	D C 20540	

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(0). 3	ee instruction	υ.																		
Name and Address of Reporting Person* Sandoval David I.						2. Issuer Name and Ticker or Trading Symbol MAXCYTE, INC. [MXCT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Sandovai David I.										-				Direc			10% Ov	-		
,														1	Office below	er (give title		Other (s	specify	
(Last)	(Fi	rst) (M	/liddle)			Date of Earliest Transaction (Month/Day/Year)										′	00	,		
C/O MAXCYTE, INC.					01/1	01/13/2025								GENERAL COUNSEL						
,																				
9713 KEY WEST AVENUE, SUITE 400					4 15									0 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
					4. 17	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															Form filed by One Reporting Person					
ROCKV	ILLE M	D 2	0850											Form filed by More than One Reporting						
															Perso		ie uie	an One Repo	Jilling	
(City)	(St	ate) (2	Zip)																	
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	quired	l, Dis	posed of	, or B	enefic	ially	Own	ed				
1. Title of	Security (Ins	tr. 3)		2. Transact	ion		eemed		3.		4. Securities				5. Amo				7. Nature	
	• •	,		Date (Month/Day	Execution Date, /Year) if any				Transaction Disposed Of (D) (Instr. 3, 4)				tr. 3, 4 a	4 and Securiti Benefic					of Indirect Beneficial	
(Mont			(WIOIIIII/Day			th/Day/Year)		8) S)				Own		d Following (i) (Instr. 4)	Ownership			
										1		(A) or Deid		Reported Transaction(s)					(Instr. 4)	
									Code	v	Amount	(D) Pric		(Instr. 3 and 4)						
Common Stock 01/13/20					025				S ⁽¹⁾		4,466	D \$4.53		391 41,447		1 447		D		
Common Stock 01/13/20									3	<u> </u>	7,700		Ψ	J)1		1,447		Ь		
		Tal	ole II -	- Derivati	ve Se	curit	ies A	Acqu	ired,	Disp	osed of, o	or Ber	neficia	lly (Owne	d				
				(e.g., pu	ıts, ca	alls, v	varra	ınts,	optio	ns, o	convertib	le sec	urities	s)						
1. Title of	2.	3. Transaction	3A. De	emed	4.		5. Nu	mber	6. Date	Exerc	isable and	7. Title	and	8. F	rice of	9. Number	of	10.	11. Nature	
Derivative	Conversion	Date	Execution Date,		Transa		of		Expiration Date Amount of				nt of	Derivative Security		derivative		Ownership	of Indirect	
Security (Instr. 3)	or Exercise Price of	(Month/Day/Year)	if any (Month	n/Day/Year)	Code (ınstr.	nstr. Derivative Securities		(Month/Day/Year) Securitie					tr. 5)	Securities Beneficiall	Form: Direct (Form: Direct (D)	Beneficial Ownership		
(33 3,	Derivative Security			Acquired				Derivative Security (Ins 3 and 4)				tive	- [` '		Owned		or Indirect	(Instr. 4)		
					(A) or Disposed								1		Following Reported		(I) (Instr. 4)			
					1 1		of (D)					,	1	Transactio		n(s)				
				(Instr. and 5)			'							(Instr. 4)						
													Amount	1						
													Amount or							
								Date		Expiration		Number of								
					Codo	l.,	_{/A\}	(D)	Date	aabla	Doto		Charas	1		1	- 1		1	

Explanation of Responses:

1. These shares were sold to cover tax withholding due upon vesting of previously granted restricted stock units. Such "sale to cover" was automatically effected to satisfy tax withholding obligations and does not represent a discretionary trade by the Reporting Person.

/s/ David Sandoval

01/14/2025

** 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.