FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL					
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

								.,			. 501		3310								
1. Name and Address of Reporting Person* Johnston John Joseph						2. Issuer Name and Ticker or Trading Symbol MAXCYTE, INC. [MXCT]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)			(Middle)				of Earli 2024	est Tran	isac	ction (Mo	onth/	Day/Year)	- ■	_	(give title		Other (s below)	·			
C/O MAXCYTE, INC. 9713 KEY WEST AVENUE, SUITE 400					4. If											6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person					
(Street) ROCKVILLE MD 20850					Form filed by More than One Reporting Person														rting		
(City)	ty) (State) (Zip)					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-Deriv	ative	Se	curit	ies Ac	qı	uired,	Dis	posed o	of, or B	enef	icially	/ Owned	t				
Da				2. Transa Date (Month/I	2A. Deemed Execution Date, if any (Month/Day/Year)				3. Transac Code (Ir 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securities Beneficia Owned Fe		es For ally (D) Following (I) (: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) (D)	or F	rice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)				
Common	7/2024	2024				M ⁽¹⁾		5,044	1 A	. :	\$1.641	146,994			D						
Common Stock 06/27						2024				M ⁽¹⁾		4,956	5 A	. ;	\$2.926	151	1,950		D		
Common Stock 06/27						2024				S ⁽¹⁾		10,000 D \$		53.99 ⁽²	141,950			D			
		7	able II -									osed of onverti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transactic Code (Inst					Date Exe piration lonth/Day	Date		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
					Code	v	(A)	(D)	Da Ex	ate xercisabl		xpiration ate	Title	or Nu of	mber ares						
Stock Option (right to buy)	\$1.641	06/27/2024			M ⁽¹⁾			5,044		(3)	0	1/20/2030	Commor Stock	5,	044	\$0	1,121		D		
Stock Option	\$2.926	06/27/2024			M ⁽¹⁾			4,956		(3)	0	7/14/2027	Commor	4,	956	\$0	13,396		D		

Explanation of Responses:

buy)

- 1. The sales and option exercises reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on December 19, 2023.
- 2. The price reported is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$3.93 to \$4.02, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, 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 range set forth in this footnote.
- 3. This option is fully vested and exercisable.

/s/ Brian Leaf, Attorney-in-

07/01/2024

Fact

** 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.