FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049					

OMB APPROVAL								
OMB Number:	3235-0287							

0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:		
	Estimated average burde	en	

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 10b5-1(c). See Instruction 10.

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

Name and Address of Reporting Person* Collins Cynthia					2. Issuer Name and Ticker or Trading Symbol MAXCYTE, INC. [MXCT]								ck all applice Directo	able) r	g Pers	on(s) to Iss	vner				
(Last) C/O MA	(F XCYTE, II	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/14/2024							Officer below)	Officer (give title below)		Other (s below)	pecify				
9713 KEY WEST AVENUE, SUITE 400					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)	ILLE M	ID	20850									Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				I					
(City)	(S	tate)	(Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securiti Disposed 5)					5. Amou Securitie Beneficia Owned F Reported	es For ally (D) Following (I) (: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or	Price	Transact (Instr. 3 a	ction(s)			(111501. 4)		
Common Stock 10			10/1	4/202	1/2024		Α		51,679	1,679 ⁽¹⁾ A		\$ <mark>0</mark>	51,679			D					
	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 I if any (Month/Day	Date,	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisab		Expiration Date	Title	or Nu of	ımber							
Stock Option (right to buy)	\$3.87	10/14/2024			A		97,698		(2)	1	0/13/2034	Common Stock	97	7,698	\$0	97,698	3	D			

Explanation of Responses:

- 1. These shares represent restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of the Issuer's Common Stock. One hundred percent (100%) of the RSUs shall vest on October 14, 2025, subject to the Reporting Person's continued service to the Issuer through such vesting date.
- 2. One-third of the shares underlying this option shall vest on October 14, 2025, and the remainder shall vest in twenty-four (24) substantially equal monthly installments thereafter, subject to the Reporting Person's continued service to the Issuer through each vesting date.

/s/ David Sandoval, Attorneyin-Fact 10/16/2024

** 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.