FORM 4

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

Washing

Washington, D.C. 20549	OMB APPRO			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3		

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

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

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

Name and Address of Reporting Person*     Schmid John P.				2. Issuer Name and Ticker or Trading Symbol Xeris Biopharma Holdings, Inc. [ XERS ]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
(Last)	(Fir	rst) (I	Middle)			te of E 0/202		Trans	action (N	/lonth/	nth/Day/Year)				Office	er (give title v)		Other (s pelow)	specify
C/O XERIS BIOPHARMA HOLDINGS, INC. 1375 WEST FULTON STREET, SUITE 1300				4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person						
(Street)	AGO IL 60607			Form filed by More than One Reporting Person											orting				
(City)	(St	ate) (2	(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.													
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3en	eficia	ly Own	ed			
Da			Date			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired Disposed Of (D) (Instr. 5)			tr. 3, 4 and Sec Ber Ow		5. Amount of Securities Beneficially Owned Following		ect irect 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or	Price	Report Transa (Instr.	ed ction(s) 3 and 4)			(Instr. 4)
Common Stock 05/10/				2024			P		5,400	A	A \$1.91		16,400 <sup>(1)</sup>		I		By: The Schmid Family Trust dated August 15, 2017		
Common	Stock								63,159		D								
		Tal									osed of, o				Owne	d			
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction Date Execution Date, (Month/Day/Year)			4. Transa	4. Transaction of Code (Instr. 8) Se Ac (A) Dis		vative viities vired r osed )		Exerci	sable and	7. Title and Amount of Securities Underlying Derivative Security (I 3 and 4)		i 8	. Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owr Forr Dire or Ir (I) (I	ership n: ct (D) idirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V (A) (D)		Date Exercis	able	Expiration Date	Title	or	ount mber ires							

## **Explanation of Responses:**

1. The reporting person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all of the reported shares for purposes of Section 16 or for any other purpose.

## Remarks:

/s/ Beth Hecht, as Attorney-in-05/10/2024 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.