FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OIVIB APPR	MB APPROVAL								
OMB Number:	3235-0287								
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hours per response:	0.5								

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-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

. ,	A deleter a se				2 100	uer Na	me ar	nd Tick	er or Tr	ading	Symbol			5 Rai	ationshir	of Reportin	na Pere	on(s) to le	SUE	
Name and Address of Reporting Person* Shannon John Patrick Jr				2. Issuer Name and Ticker or Trading Symbol Xeris Biopharma Holdings, Inc. [XERS]								Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Snannon John Patrick Jr						The stephania Horange, me. [ABR6]								1	Direc	tor		10% Ov	vner	
				0.0-	465		T		N 4 41-	(D 0 /)			V	Officer (give title below)			Other (s	specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 01/03/2025									See Remarks					
C/O XERIS BIOPHARMA HOLDINGS, INC.				***	orros/2025															
1375 WEST FULTON STREET, SUITE 1300																				
					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Ind Line)	Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CHICAG	O IL	6	0607											V	Form	filed by On	e Repor	ting Perso	on	
CITICAC	IC IL	Ü	0007												Form filed by More than One Reportin					
(City)	(Sta	ato) (7	in)												Perso	on				
(City)	(30	(2	(ip)																	
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	3ene	ficiall	y Own	ed				
1. Title of S	Security (Inst	r. 3)		2. Transac	tion											7. Nature				
Date (Month/Day				y/Year) if any						Disposed Of (D) (Instr. 3, 5)		, 4 and	Securit Benefic	cially	(D) or 1	Form: Direct (D) or Indirect	of Indirect Beneficial			
				(Mon		onth/Day/Year)		8)		<u> </u>			Report		(I) (Ins		Ownership (Instr. 4)			
									Code	۱v	Amount	(A) (D)	or F	Price		ction(s) 3 and 4)				
Common Stock 01/03/2					025			F		39,443(1)) I)	\$3.61	2.1	2,108,618		D	$\overline{}$		
Common	DIOCK			01/03/2	2023	<u> </u>			<u> </u>		37,443			Ψ3.01	2,1	00,010				
		Tal									osed of, (Owned	d				
				(e.g., pu	its, ca	alls, v	varra	ants,	optio	ns, c	onvertib	le se	curit	ies)						
1. Title of Derivative	2. Conversion	3. Transaction 3A. De Execu		emed ion Date.	4. Transa	ction	5. Number of		6. Date Exercisable and Expiration Date			7. Title and Amount of			Price of rivative	9. Number derivative		10. Ownership	11. Nature of Indirect	
Security	or Exercise	(Month/Day/Year)	if any			Code (Instr.		Derivative Securities		(Month/Day/Year)			Securities		curity	Securities Beneficially	Fo	Form:	Beneficial	
` Derivative `				/Day/Tear)	8)		Acquired					Underlying Derivative		Ι.	str. 5)	Owned	´ oı	Direct (D) or Indirect	Ownership (Instr. 4)	
	Security						(A) or Disposed					Security (Insti 3 and 4)		str.		Following Reported	'	(I) (Instr. 4)		
								of (D) (Instr. 3, 4								Transaction (Instr. 4)	n(s)			
							and 5)									, ,				
													Amou	unt						
									Date		Evnirotica	Numb of Title Share		ber						
					Code	Code V		(A) (D)		sable	Expiration Date			es						

Explanation of Responses:

1. Represents shares that have been withheld by the Issuer to satisfy its income tax and withholding and remittance obligations in connection with the net settlement of Restricted Stock Units vested as of January 3, 2025.

Remarks:

Chief Executive Officer and Director

/s/ Beth Hecht, Attorney-in-

Fact

** Signature of Reporting Person Date

01/07/2025

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.