Instruction 1(b)

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

<b>UNITED STATES</b>	SECURITIES AND	EXCHANGE	COMMISSION
	Washington, D.C. 2	20549	

OMB APPROVAL

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

STATEMENT	OF	CHANGES	IN BENEFIC		<b>OWNERSHIP</b>
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Name and Address of Reporting Person <sup>*</sup> Schmid John P.					uer Name <b>and</b> Tick is Biopharma				(Che	5. Relationship of Reporting Person(s) f (Check all applicable)			ssuer			
(Last) (First) (Middle)						te of Earliest Trans 2/2024	action (	Month	/Day/Year)		Officer below)	Officer (give title below)		(specify		
C/O XERIS BIOPHARMA HOLDINGS, INC. 1375 WEST FULTON STREET, SUITE 1300 (Street) CHICAGO IL 60607				4. If A	mendment, Date c	of Origin	al File	d (Month/Da	Line)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
CHICAC (City)			50607 Zip)		Rule 10b5-1(c) Transaction Indication											
		Table	e I - No	on-Deriva	tive S	ecurities Acc	luired	, Dis	posed of	, or Be	neficial	ly Owne	d			
Date		2. Transacti Date (Month/Day	Execution Date		3. Transaction Code (Instr 8)					5. Amou Securitie Beneficia Owned F Reported	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3 a	tion(s)		(1150. 4)		
															By: The	
Common	Stock			08/12/2	024		Р		4,515	A	\$2.2474	4 25,2	200(1)	Ι	Schmid Family Trust dated August 15, 2017	
Common				08/12/2	024		Р		4,515	A	\$2.2474		200 <sup>(1)</sup> 3,159	I	Schmid Family Trust dated August	
		Ta	ble II -	- Derivati	ve Se	curities Acqu Ils, warrants,	ired, I		osed of, o	or Ben	eficially	113		-	Schmid Family Trust dated August	

Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	nth/Day/Year) if any C		Transaction Code (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)		Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

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-Fact 08/13/2024

\*\* 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.