FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
rvasiliigtoii,	D.C.	20040	

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* Camire Brian				2. Issuer Name and Ticker or Trading Symbol WM TECHNOLOGY, INC. [MAPS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner								
					Date of Earliest Transaction (Month/Day/Year)							X	Office belov	er (give title		10% Ov Other (s below)			
(Last)	(Fir	,	Middle)		09/30/2023									General Counsel					
C/O WM TECHNOLOGY, INC.				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable								
41 DISCOVERY					4. Il Allielidinelle, Bate of Original Filed (World) Bay/ Tear)						Line)	Line)							
(Street)													X	X Form filed by One Reporting Person					
IRVINE	CA	. 9	2618								Form filed by More than One Reporting Person				rung				
(City) (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.													
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	, or E	Bene	ficial	y Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		ate,	3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. 5)				Securi Benefi Owned	Securities Beneficially Owned Following		rect lirect 4)	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	unt (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A Common Stock 09/30/2				09/30/2	2023		A		655,468 ⁽¹	.) /	A	\$0.00		799,425					
	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)	if any	eemed tion Date, n/Day/Year)	Code (Instr. Derivative		of Deriv Secu Acqu (A) of Dispo of (D)	rative rities iired r osed)	6. Date Exercisabl Expiration Date (Month/Day/Year)		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		D S (I	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: y Direct (D) or Indirec (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)
							(D)	Date Exercis	sable	Expiration Date Title Shar		ber							

Explanation of Responses:

1. Represents the number of shares of Class A Common Stock underlying restricted stock units ("RSUs"). Each RSU represents the contingent right to receive one share of the Issuer's Class A Common Stock. 1/12th of the RSUs shall vest on each Quarterly Date following September 1, 2023 (the "Vesting Commencement Date"), subject to the Reporting Person's Continuous Service (as defined in the Issuer's 2021 Equity Incentive Plan) through each such date. "Quarterly Date" means each of February 15, May 15, August 15 and November 15.

Remarks:

Brian Camire, by /s/ Ron A. Metzger, Attorney-in-Fact

10/27/2023

** 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.