FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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*     Tan Fiona						2. Issuer Name and Ticker or Trading Symbol WM TECHNOLOGY, INC. [ MAPS ]									Relationship eck all app X Direc	,	ng Pers	son(s) to Is: 10% Ov	
(Last)	(Fir	est) (N	Middle)			te of E 1/202		Trans	saction (	ction (Month/Day/Year)					Office	er (give title v)		Other (s below)	pecify
C/O WM TECHNOLOGY, INC. 41 DISCOVERY					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	dividual or Joint/Group Filing (Check Applicab ) K Form filed by One Reporting Person				·	
(Street) IRVINE CA 92618														Form filed by More than One Reporting Person					
(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	<u> </u>			lly Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Exect if any	eemed ution Date, th/Day/Year)		3. 4. Securitie: Disposed O Code (Instr. 8)		s Acquired (A) of (D) (Instr. 3, 4		A) or B, 4 and	Benefi Owned	ties cially I Following	Form:	: Direct   0 Indirect   I str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or	Price		action(s) 3 and 4)			(Instr. 4)
Class A Common Stock 10/01/2						2023					156,250 <sup>(1</sup>	1)	A	\$0.0	0 42	428,063		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 Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye		ate	7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y C	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Coo		v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amo or Num of Sha						

## **Explanation of Responses:**

1. Represents the number of shares of Common Stock underlying restricted stock units ("RSUs"). Each RSU represents the contingent right to receive one share of the Issuer's Common Stock. The RSUs will fully vest in equal annual installments on the date of each remaining annual meeting of stockholders that is part of the Reporting Person's current term, beginning with the annual meeting that is following the Issuer's next annual meeting of stockholders subsequent to the effectiveness of this RSU grant, subject to acceleration, and subject to the Reporting Person's Continuous Service (as defined in the Issuer's 2021 Equity Incentive Plan) through such vesting date.

## Remarks:

Fiona Tan, by /s/ Ron A. Metzger, Attorney-in-Fact

10/03/2023

\*\* 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.