FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

vasnington,	D.C. 20549	

OMB APE	PROVAL
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0.5

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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

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* Stueland Katherine			2. Issuer Name and Ticker or Trading Symbol GeneDx Holdings Corp. [WGS] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								suer								
Stucian	u Namer	IIIC												X	Direct	tor		10% Ov	vner
(Last)	(Fir	rst) (N	Middle)	3. Date of Earliest Transaction (Month/Day/Year)						X	Office below	er (give title		Other (s below)	specify			
C/O GENEDX HOLDINGS CORP.			03/1	03/12/2024 CHIEF EXECUTIVE OFFICER															
333 LUDLOW ST., NORTH TOWER				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														X	Form	Form filed by One Reporting Person			
	STAMFORD CT 06902													Form filed by More than One Reporting Person				orting	
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication							on .							
						ck this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to sfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - N	on-Deriva	tive S	Secui	ities	Ac	quire	d, Di	sposed of	f, or B	Benefici	ally	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			Execution Da		on Dat	·	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			5)	Securit Benefic Owned	Securities For Beneficially (D) Owned Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
						Ī		Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A Common Stock 03/12/200			24			j	S ⁽¹⁾		2,618	D	\$9.209	56,507			D				
		Tat	ble II	- Derivati						•				•	wne	t			
						1115, V					convertib	_		_					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if any	Deemed ution Date, / /tth/Day/Year)	4. Transaction Code (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed	Expiration Date (Month/Day/Year)			Amount of Securities		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The sales reported on this Form 4 represent shares sold by the Reporting Person to cover tax withholding obligations in connection with the vesting and settlement of restricted stock units. The sales were to satisfy tax withholding obligations to be funded by a "sell to cover" transaction.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$9.08 to \$9.21, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth herein.

/s/ Devin Schaffer, Attorney-

03/13/2024

in-Fact

** 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.