FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB 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 10b5-1(c). See Instruction 10

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

Instruc	11011 10.																		
1. Name and Address of Reporting Person* Bernstein Bruce						2. Issuer Name and Ticker or Trading Symbol XWELL, Inc. [XWEL]							(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Bernstelli Bruce</u>														Director	or		10% Ow	ner	
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year)							\dashv	Officer below)	(give title		Other (s below)	pecify			
C/O XWELL, INC.					11/15/2024														
·																			
254 WEST 31ST STREET, 11TH FLOOR					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															iled by One	Reno	rtina Persor	, 1	
NEW YO	ORK N	Y	10001												iled by More		Ü		
(City)	(S	tate)	(Zip)																
		Tab	le I - Non	-Deriv	ativ	e Se	curities	s Ac	quired, D	ispos	ed o	f, or Be	neficial	ly Owned	I				
1. Title of S	Security (Ins	tr. 3)		2. Transa	action				3.			ties Acquire		5. Amou				'. Nature	
Date (Month/Date					Day/Ye	Execution Date, Transaction Disposed Of (D) (Instr. 3, ay/Year) if any Code (Instr. 5)					tr. 3, 4 and	Beneficially (D) or Indirect Owned Following (I) (Instr. 4)				of Indirect Beneficial			
(•	(Month/Day/Year) 8)										Ownership Instr. 4)			
								Code	Am	nount	(A) or (D)	Price	Transact	nsaction(s) tr. 3 and 4)					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of	2.	3. Transaction	3A. Deemed	1 4		. 5. Number			6. Date Exercisable and			7. Title and	d Amount	8. Price of	9. Number of		10.	11. Nature	
Derivative	Conversion		Execution D		ransaction ode (Instr.				Expiration Date			of Securiti		Derivative			Ownership	of Indirect Beneficial	
(Instr. 3)	Security or Exercise (Month/Day/Year) if any (Month/Day/Ye Derivative Security					Securi		Securities		Derivative Secu			Security	Security (Instr. 5)	Securities Beneficially		Direct (D)	Ownership	
				1			Acquired (A) or Disposed		(Instr. 3 and 4)				nd 4)		Owned Following Reported			(Instr. 4)	
						of (D) (Instr. 3, 4 and 5)							Transaction(s) (Instr. 4)						
													Amount	1					
													or Number						
							l		Date	Expira	ation		of						
				C	ode	٧	(A)	(D)	Exercisable	Date		Title	Shares						
Employee stock option (right to buy) ⁽¹⁾	\$1.6548	11/15/2024			Α		44,037		(1)	11/15/	/2034	Common Stock	44,037	\$0	44,037		D		
buy)(1)																			

Explanation of Responses:

1. Represents stock options to purchase up to 44,037 shares of Common Stock with such stock options vesting 100% on the first anniversary of the date of the grant, provided that the reporting person is providing services to the Company through such vesting date.

/s/ Cara Soffer, Attorney-in-fact for Bruce Bernstein

** Signature of Reporting Person Date

11/18/2024

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.