FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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

1. Name and Address of Reporting Person* Goins Melanie F (Last) (First) (Middle) 51 ASTOR PLACE THIRD FLOOR (Street) NEW YORK NY 10003 (City) (State) (Zip)						2. Issuer Name and Ticker or Trading Symbol 1stdibs.com, Inc. [DIBS] 3. Date of Earliest Transaction (Month/Day/Year) 03/08/2023 4. If Amendment, Date of Original Filed (Month/Day/Year)										S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) General Counsel S. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action	ction 2A. Deemed Execution Date			3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)			A) or	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock 03/08/						2023				M		10,664 A		_	(1)	- `	32,690		D	
Common Stock 03/09/					9/2023	3				М		3,260	(2)	D \$0		29,430			D	
1. Title of Derivative Security (Instr. 3)	e of 2. 3. Transaction 3A. Detaitive Conversion Date Executify or Exercise (Month/Day/Year) if any		3A. Deeme	(e.g., p ed Date, yy/Year)		calls, w 5. ction Instr. De Se Ac (A) Dii		warrants, i. Number of			cisa Date Yea	onverti	or		curity) mount	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
Restricted Stock Units	(1)	03/08/2023			М			5,332		(3)		(3)	Commo		,332	\$0	63,975	5	D	
Restricted	l	1		- 1		I	1	I	ı		1		C				I		I	1

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive one share of Issuer common stock.

03/08/2023

- 2. These shares were sold to cover the tax withholding obligations created by the vesting of Reporting Person's restricted stock units.
- 3. The initial number of restricted stock units granted shall vest in 16 equal quarterly installments starting on June 8, 2022, provided the Reporting Person continues to have a service relationship with the Issuer at such time. The restricted stock units have no expiration date.

(4)

5 332

4. Fifty percent (50%) of the initial number of restricted stock units granted shall vest in 4 equal quarterly installments starting on June 8, 2022, provided the Reporting Person continues to have a service relationship with the Issuer at such time. Thereafter, fifty percent (50%) of the initial number of restricted stock units granted shall vest in 8 equal quarterly installments starting on June 8, 2023, provided the Reporting Person continues to have a service relationship with the Issuer at such time. The restricted stock units have no expiration date.

Remarks:

Stock Units

/s/ Melanie Goins ** Signature of Reporting Person

Common

5,332

\$0

03/10/2023

Date

21,325

D

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.