FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-02 | | | | | | | |
| Estimated average burden | | | | | | | |
| 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).

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

| 1. Name and Address of Reporting Person* Edmiston Bryan | | | | | | 2. Issuer Name and Ticker or Trading Symbol WisdomTree Investments, Inc. [WETF] | | | | | | | | | all applicabl | le) | erson(| son(s) to Issuer | | |
|--|---|------------|--|--------|---|---|--|---|--|-----|--------------------|--|--|-------------------------------------|---|---|---|--|--|--|
| (Last) | .ast) (First) (Middle) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/25/2022 | | | | | | | | | ive title Other (specify below) nief Financial Officer | | | |
| 230 PARK AVENUE, 3RD FLOOR WEST | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 01/27/2022 | | | | | | | | 6. Indiv | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (Street) NEW YORK NY 10169 (City) (State) (Zip) | | | | | | \(\frac{1}{2}\) | | | | | | | | | Form filed by More than One Reporting Person | | | | g Person | |
| (Oily) | (Gtate) | | ıble I - Nor | n-Deri | ivativ | e Se | curitie | s Acq | uired, D | isp | osed of | f, or Be | nefic | ially Ow | ned | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date | | | | | | ear) | 2A. Deem Execution if any (Month/Da | ed Date, | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) | | | or | 5. Amount of 6 Securities F Beneficially Owned o | | Form | lirect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| 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 | | 3A. Deemed Execution Date, if any (Month/Day/Year | ite, T | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | c | Code V | | (A) | (D) | Date Exercisab | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | on(s) | | | |
| Performance Based Restricted Stock Units | \$0.00 | 01/25/2022 | | | A | | 7,757 | | 01/25/202 | 5 | (1) | Commo Stock | | 7,757 | \$0.00 | 7,757 | | D | | |

Explanation of Responses:

1. The number of shares of Common Stock to be issued upon vesting of the PRSUs will range between 0% to 200% of the number of shares indicated above (the target share amount). This Amendment to Form 4 is being filed to update the target share amount to reflect the grant date fair market value of the PRSUs as determined by an independent valuation consultant.

Remarks:

/s/ Marci Frankenthaler, Attorney-04/22/2022

Date

in-Fact

** Signature of Reporting Person

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.