SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per 0.5 response:

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 [*] Smith Matthew Tate	2. Date of Event Requiring Stateme (Month/Day/Year)	ent	3. Issuer Name and Ticker or Trading Symbol <u>MARKETWISE, INC.</u> [MKTW]						
(Last) (First) (Middle) 1125 N. CHARLES STREET	05/01/2023		4. Relationship of Reporting Issuer (Check all applicable) X Director Officer (give	10% O Other (wner	5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) BALTIMORE MD 21201 (City) (State) (Zip)			title below)	below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)			. Amount of Securities eneficially Owned (Instr.)				4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4)	tive Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)		3. Title and Amount of So Underlying Derivative So (Instr. 4)			rsion rcise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Explanation of Responses:	Date Expi Exercisable Date	piration te	Title	Amount or Number of Shares			or Indirect (I) (Instr. 5)	5,	

Remarks:

No securities are beneficially owned.

No securities are beneficially owned.

/s/ Gary Anderson, Attorney-in-fact

05/15/2023

Date

** 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 5 (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.