

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person* Nied Joseph Andrew (Last) (First) (Middle) C/O SHAPEWAYS HOLDINGS, INC., 30-02 48TH AVENUE (Street) LONG ISLAND CITY, NY 11101 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 05/16/2022	3. Issuer Name and Ticker or Trading Symbol Shapeways Holdings, Inc. [SHPW]		
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) Chief Operating Officer		5. If Amendment, Date Original Filed(Month/Day/Year)
		6. Individual or Joint/Group Filing Check Applicable Line <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person		

### Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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 control number.**

### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Nied Joseph Andrew C/O SHAPEWAYS HOLDINGS, INC. 30-02 48TH AVENUE LONG ISLAND CITY, NY 11101			Chief Operating Officer	

## Signatures

/s/ Jennifer Walsh, Attorney-in-Fact	05/25/2022
<small>**Signature of Reporting Person</small>	<small>Date</small>

## Explanation of Responses:

**No securities are beneficially owned**

\* 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).

### Remarks:

Exhibit 24 - Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Shapeways Holdings, Inc.

30-02 48th Avenue  
Long Island City, NY 11101

POWER OF ATTORNEY

KNOW ALL BY THESE PRESENTS, the undersigned, as a Section 16 reporting person of Shapeways Holdings, Inc. (the "Company"), hereby constitutes and appoints each of Frank N. Strumolo, Scott Paraker

- (1) execute for and on behalf of the undersigned a Form ID Application and/or "Update Passphrase Confirmation," if required, and submit the same to the United States Securities and Exchange Co
- (2) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of the Company or as a holder of 10% or more of the Company's securities, Forms 3,
- (3) do and perform any and all acts for and on behalf of the undersigned that may be necessary or desirable to complete and execute any such Form 3, 4 or 5 or similar form or report required b
- (4) take any other action of any type whatsoever in connection with the foregoing that, in the opinion of such attorney-in-fact, may be of benefit to, in the best interest of or legally requir

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary or proper to be done in the exer

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect to the undersigned's holdings of and transactions i

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of the date written below.

Dated: April 27, 2022

/s/ Joseph Andrew Nied  
Joseph Andrew Nied