FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL										
OMB Number: 3235-028										
Estimated average b	urden									
hours per response:	0.5									

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

Name and Address of Reporting Person* Quick Christopher C				2. Issuer Name and Ticker or Trading Symbol Virtu Financial, Inc. [VIRT]								Relationship of eck all applications of the contraction of the contrac	,		son(s) to Issu 10% Ow				
(Last)	`	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/03/2024								Officer below)	(give title		Other (s below)	pecify	
C/O VIRTU FINANCIAL, INC. 1633 BROADWAY 4. If Amendme					If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person							
(Street) NEW YORK NY 10019												Form filed by More than One Reporting Person							
NEW TORK INT 10019				- Ri	Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	le I - Non	-Deri	vativ	e Se	curitie	s Acq	uired,	Dis	posed of	f, or Be	neficial	ly Owned					
1. Title of Security (Instr. 3) 2. Trans Date (Month/					action 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)				Beneficia Owned F	es For ially (D) Following (I) (: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	mount (A) o		Transact	Reported Transaction(s) (Instr. 3 and 4)				
Class A common stock 07/0.				3/202	5/2024		M		8,760 A		(1)	51,	51,123		D				
		-	Γable II - I (•	,	•	osed of, onvertib		•	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	Date,	4. Transa Code (I 8)	ction Derivative E		ction Derivative Securities Acquired (A) or Disposed of (D) (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) Securities Underlying Derivative Security (Inst and 4)			of s ng e	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	Owner Form Direct or Inc. (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	,(o)			
Restricted Stock Unit	(2)	07/03/2024			М			8,760	(3)		(3)	Class A common stock	8,760	\$0	0		D		
Restricted Stock Unit	(2)	07/03/2024			A		6,681		(4)		(4)	Class A common stock	6,681	\$0	6,681		D		

Explanation of Responses:

- 1. Shares of Class A common stock issued in settlement of vested restricted stock units ("RSUs") granted under the Issuer's Amended and Restated 2015 Management Incentive Plan.
- 2. Each RSU is granted under the Issuer's Amended and Restated 2015 Management Incentive Plan and represents a contingent right to receive one share of Class A common stock of the Issuer.
- 3. The RSUs vested on July 3, 2024.
- 4. The RSUs vest on July 3, 2025.

Remarks:

/s/ Justin Waldie, as Attorneyin-Fact

07/03/2024

** Signature of Reporting Person

Date

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.