FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549	

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

0.5

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	nd Address of	Reporting Person*							er or Tradino		mbol			Relationship leck all appli	cable)	g Pers	on(s) to Issu	
(Last) 2648 IN	•	rst) NAL BLVD., S'	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/06/2024								Officer below)	(give title		Other (s below)	pecify
(Street) OAKLA	ND CA	A	94601 (Zip)		_ 4. l	f Ame	endment, C	Date o	f Original Fil	ed (N	Month/Da	y/Year)	Lin	Form f	iled by One	Repo	(Check Apporting Person	
		Tab	le I - Nor	ı-Deriv	vativ	e Se	curities	Ac	quired, D	ispo	osed o	f, or Be	neficia	ly Owned	t			
Date			2. Trans Date (Month	/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 5)			Benefici Owned	es For ally (D) Following (I) (rm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code V	,	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
		٦							uired, Dis , options					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	4. Transaction Code (Instr 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amor of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares					
Restrictive Stock Unit	(1)	12/06/2024			A		64,801		(2)		(2)	Class A Common Stock	64,801	\$0	90,485	5	D	

Explanation of Responses:

- 1. The Reporting Person was granted restricted stock units ("RSUs") which represent a contingent right to receive one share of Issuer's Class A Common Stock for each RSU.
- 2. The RSUs were granted in connection with the Reporting Person's service as a member of the Board of Directors for the Issuer. Subject to the Reporting Person's continued service, the RSUs will vest in full 2. The Rosos were gained in Confidence with the Roporting Fersion's service, and a pro-rata basis upon termination of service, including resignation before vesting. Upon termination of service, the Board in its discretion may fully vest the Reporting Person's RSUs. RSUs will fully vest in connection with the occurrence of a change in control or any other transaction the Board designates as a "special transaction". Vested RSUs will settle on or following the vesting date, but in any event within 60 days following the vesting date (unless the Reporting Person and the Issuer have agreed in writing to a later settlement date pursuant to the procedures the Issuer may prescribe at its discretion).

/s/ Marianne Lewis, Attorneyin-Fact

12/09/2024

** 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.