FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | .C. 20549 |
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| STATEMENT | OF | CHANGES | IN BE | NEFICIAL | OWNE | RSHIP |
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| OMB APPROVAL | | | | | | | | | |
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| 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

| | nd Address of <u>Michael</u> | Reporting Person* | | | | er Name a i <mark>rd Ltd</mark> | | ker or Tradii Z | ng S | ymbol | | | (Che | ck all applic | cable) or | g Pers | 10% Ow | ner |
|---|--|-------------------|------------------------------------|----------------------------------|---|---|---|---------------------|---|------------------|---|---|---|--|--|--|------------------------------|-----------|
| (Last) | (F ZARD LTD | , | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 10/12/2023 | | | | | | X | below) | (give title | ıntin | Other (s below) g Officer | респу | | |
| 30 ROCE | KEFELLEF | R PLAZA | | 4 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| (Street) NEW YO | ORK N | Y : | 10112 | | | | | | | | | | X | | led by More | | orting Persor n One Repor | - 1 |
| (City) | (S | tate) (| Zip) | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | |
| Check this box to indicate that a transaction was made pursuant to a cor satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruct | | | | | | | | | on or written | plan t | hat is intended | l to | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| Date | | | | 2. Transact Date Month/Day | Execution Date | | r, Transaction Dispose Code (Instr. 5) | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 a | | A) or , 4 and | | es Forr ially (D) o Following (I) (II | | n: Direct or Indirect E estr. 4) | . Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | mount (A) or (D) | | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | 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 Security 3. Transaction Date Execution Date (Month/Day/Year) if any (Month/Day/Year) | | Cod | Transaction of Code (Instr. Deriva | | | Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Cod | de V | (A) | (D) | Date Exercisable | | xpiration ate | Title | or | ount nber ıres | | | | | |
| Restricted Stock Units | (1) | 10/12/2023 | | A | | 2,498 | | (2) | | (2) | Class A Common Stock | 2,4 | 498 | (1) | 2,498 | | D | |

Explanation of Responses:

- 1. Each Restricted Stock Unit ("RSU") represents a contingent right to receive one share of Class A Common Stock.
- 2. Of these RSUs, 26% will vest on March 1, 2024, 35% will vest on March 3, 2025 and 39% will vest on March 2, 2026.

Remarks:

/s/ Michael Gathy by Shari L. Soloway under a P of A

10/16/2023

** 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.