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 BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response.	0.5								

	tion 1(b).			File								Exchan any Act			34		<u>[_</u> "	louis pei	response.		0.5
	nd Address o odskaya	f Reporting Person [*] Natalia					Name a rt Holo									eck all ap Dire	plicable) ctor	Ü	,	o Owi	ner
(Last)	,	irst) LDINGS, INC.	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/17/2023										X Office below	w) `				pecify	
2950 S. DELAWARE STREET, SUITE 300					4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) SAN MA	ATEO C	A	94403														n filed by		eporting P nan One R		- 1
(City)	(S	state)	(Zip)		Rι	ıle '	10b5-	1(c) Tra	ınsa	ctio	n Ind	lica	tion							
Check this box to indicate that a transaction was made pursuant to a contract, satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10											tract, instru on 10.	ction or w	ritten pla	n that is int	ended	l to					
		Tab	le I - Nor	n-Deriv	ative	Sec	curitie	s Ac	cquire	ed, D	ispo	osed o	of, o	r Ben	eficial	ly Own	ed				
Date				Date	th/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		` c₀	Transaction Code (Instr.				(A) or . 3, 4 and	Secui Benef Owne	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
		Со	de V	, ,					Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)					Instr. 4)			
Common Stock 03/1						7/2023		A	4		1,693 ⁽¹⁾ A		A	\$ <mark>0</mark>	41,621(2)			D			
		7	Table II -	Derivat (e.g., p												Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			le and	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		4)	8. Price of Derivativ Security (Instr. 5)	deriv Secu Bene Owne Follo Repo	rities ficially ed wing orted saction(s	10. Owner: Form: Direct or Indii (I) (Inst	D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	isable	Exp Date	oiration e	Title	1	Amount or Number of Shares						

Explanation of Responses:

\$15.23

1. These securities are restricted stock units (RSUs). Each RSU represents a contingent right to receive one share of Common Stock. 1/4th of the RSUs shall vest on November 20, 2023 and at the end of each successive three-month period thereafter, subject to the Reporting Person continuing as a service provider through each such date.

(3)

2. Certain of these securities are RSUs. Each RSU represents a contingent right to receive one share of Common Stock, subject to the applicable vesting schedule and conditions of each RSU.

1,073

3. 1/12th of the shares subject to the option shall vest on September 20, 2023 and at the end of each successive one-month period thereafter, subject to the Reporting Person continuing as a service provider

Remarks:

Employee Stock

Option (Right to

/s/ Christopher Ing, by power of attorney

1.073

\$0

03/21/2023

1,073

D

** Signature of Reporting Person

Commor

03/17/2033

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).

03/17/2023

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.