FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0104 | | | | | | |
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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

| Name and Address of Reporting Person Das Nithya B. | | | 2. Date of Event Statement (Mon 02/26/2023 | | | 3. Issuer Name and Ticker or Trading Symbol Outbrain Inc. [OB] | | | | | | | |
|--|---------|---------------|--|-------------------------|---|--|---|----------------------------------|------------------|---|---|--|---|
| (Last) C/O OUTBRAIN 111 WEST 19TH | | (Middle) | | | | | nship of Reporting Person(s) to Is I applicable) Director | | 0% Owner | | | | Original Filed (Month/Day/Year) |
| (Street) NEW YORK | NY | 10011 | | | | | Officer (give title below) | 0 | Other (specify I | pelow) | X | Form filed by C | ne Reporting Person lore than One Reporting Person |
| (City) | (State) | (Zip) | | | | | | | | | | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | 2. Amount Owned (Ins | of Securities Beneficially str. 4) | Dire | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) | | Expira | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underly Security (Instr. 4) | | rlying | Conv | | | 5. Ownership Form: Direct (D) or Indirect (I) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | |
| | | Date Exerc | Date Expiration Exercisable Date | | Title | | | Amount or Number of Shares | | | (Instr. 5) | | |

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Veronica Gonzalez, as attorney-in-fact 03/08/2023

** Signature of Reporting Person

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 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).

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.

EXHIBIT 24

POWER OF ATTORNEY

KNOW ALL BY THESE PRESENTS, that the undersigned hereby constitutes and appoints each of Yaron Galai, David Kostman, Jason Kiviat, Veronica Gor 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: 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 respective to the executed as of this 14th day of February, 2023.

/s/ Nithya B. Das

Nithya B. Das