FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1(0). 50	ee Instruction	10.																	
Name and Address of Reporting Person* Galai Yaron				2. Issuer Name and Ticker or Trading Symbol Outbrain Inc. [OB]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Gaiai Taron														1	Direc			10% O	
(T) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A				3. Da	3. Date of Earliest Transaction (Month/Day/Year)								Officer (give title Other (spec below)						
(Last) (First) (Middle)			09/07/2024									Co-Founder and Board Chair							
111 WEST 19TH STREET														23 7 Outlief and Board Chair					
					4. If Amendment, Date of Original Filed (Month/Day/Year)) (6. Individual or Joint/Group Filing (Check Applicable					
(Street)							,		. 5			,		_ine)				3 (
NEW YO	ORK N	Y	10011											1	Form filed by One Reporting Person				
,															Form Perso	filed by Mo	re tha	in One Rep	orting
(City)	(St	tate)	(Zip)												FEISC	ווכ			
		Table	e I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	or E	Benefic	cially	Own	ed			
1. Title of S	Security (Ins	str. 3)		2. Transa	ction				3. 4. Securities Acquired (A				uired (A)	(A) or 5. Amount 3. 4 and Securities					7. Nature
Date (Month/Da				ay/Year)				Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			ınstr. 3, 4	and	Benefic	ially (D)		rm: Direct or Indirect	of Indirect Beneficial Ownership (Instr. 4)		
					(Month/Day/Year)		8)				Owned Repor		Following ed	(I) (Ir	nstr. 4)				
								Code	v	Amount	nt (A) or P		се	Transaction(s) (Instr. 3 and 4)				` ' '	
					2024	2024		-		0.145(1)	-	 		- ` 			_		
Common Stock 09/07/2					2024	.024		F		3,147 ⁽¹⁾ D) \$	4.8	3,517,825			D		
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Common Stock													99	,992(2)		I	Footnote		
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		16									onvertib				JWIIC	u			
1. Title of	2.	3. Transaction	3A. Dec		4.			ımber			isable and		e and		rice of	9. Number	of	10.	11. Nature
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)		ion Date,	Transaction Code (Instr.				Expiration Date (Month/Day/Yea			Amount of Securities			Derivative Security	derivative Securities		Ownership Form:	Beneficial
(Instr. 3)	/Day/Year)	8)	3)		Securities Acquired		,			rlying ative	(Instr. 5)		Beneficially Owned	У	Direct (D) or Indirect	Ownership (Instr. 4)			
	Derivative Security				(A			(A) or							rity (Instr	Following	wing	(I) (Instr. 4)	(
								Disposed of (D)					4)			Reported Transaction	n(s)		
							(Instr. 3, 4 and 5)								(Instr. 4)				
													Amoun	ıt					
													or Number						
						code V (A)		_(D)	Date Exercisable		Expiration Date	Title	of Shares						

Explanation of Responses:

- 1. Shares withheld by the Issuer to cover tax obligations arising upon vesting and settlement of restricted stock units under the Issuer's 2021 Long-Term Incentive Plan in a transaction exempt under Rule
- 2. Represents shares of the Issuer's common stock held by Galai Investments, LLC. The reporting person is the managing member of and owns a 55% membership interest in Galai Investments, LLC.

Remarks:

/s/ Veronica Gonzalez, as attorney-in-fact

09/09/2024

** 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.