SEC Form 4

FORM 4

(State)

(Zip)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

| Instruction 1(b). 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 Name and Address of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting P | | |
|---|----------------------------------|--|
| 2 Issuer Name and Ticker or Trading Symbol 5 Relationship of Reporting P | | |
| 1. Name and Address of Reporting Person* 2. Issuer Name and Ticker of Trading Symbol 5. Relationship of Reporting P BALEN JOHN V Cardlytics, Inc. [CDLX] X Director | erson(s) to Issuer 10% Owner | |
| (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) C/O CARDLYTICS, INC. 05/27/2022 05/27/2022 05/27/2022 | Other (specify below) | |
| 675 PONCE DE LEON AVENUE NE, 6000 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Fil | nt/Group Filing (Check Applicabl | |
| (Street) X Form filed by One Re | porting Person | |
| ATLANTA GA 30308 Form filed by More the Person | an One Reporting | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
|---------------------------------|--|---|------------------------------|---|--------|---|---|---|---|------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 05/27/2022 | | Р | | 2,000 | A | \$27.5599 | 38,798 | D | |
| Common Stock | 05/27/2022 | | Р | | 1,000 | A | \$27.3097 | 39,798 | D | |
| Common Stock | 05/27/2022 | | Р | | 1,000 | A | \$27.175 | 40,798 | D | |
| Common Stock | 05/27/2022 | | Р | | 1,000 | A | \$27.3911 | 41,798 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g. nute calle warrante ontione convertible securities)

| | (e.g., puts, cans, warrants, options, convertible securities) | | | | | | | | | | | | | | | |
|--------|---|---|--|---|------------------------------|---|--|---|---------------------|--------------------|-------------------------|--|--|--|--|--|
| D S | . Title of erivative ecurity nstr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) o Dispo of (D (Insti | 5. Number of Expiration Date (Month/Day/Yes Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ate | Amount of Securities | | Amount of Derivative Security Juderlying (Instr. 5) Derivative Security (Instr. 5) Derivative | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

Remarks:

/s/ Kirk L. Somers, Attorney-05/31/2022

** Signature of Reporting Person Date

in-Fact

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.

Check this box if no longer subject to Section 16. Form 4 or Form 5

(City)