FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
|-------------|------|-------|--|
| wasnington, | D.C. | 20549 | |

| STATEMENT OF CHAN | GES IN BENEFICI | AL OWNERSHIP |
|-------------------|-----------------|--------------|
| | | |

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

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

| ı | nd Address of RS KIRK | Reporting Person* | | | | | | | cer or Tr | | Symbol | | | (Chec | k all app Direc | , | | rson(s) to Is 10% Ov Other (s | wner |
|--|--|-------------------|---|---|---------|--|---|--|------------------|--|------------------------------|--|--------------------------------|---|---|----------------------|--|---|-------------|
| (Last) (First) (Middle) C/O CARDLYTICS, INC. | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2022 | | | | | | | | X | belov | | | below) | | | | |
| 675 PON 6000 | NCE DE LE | ON AVENUE N | IE, SUI | TE | 4. If A | Amend | Iment. | Date o | of Origina | al File | d (Month/Da | v/Year |) | 6. Ind | ividual o | r Joint/Grou | p Filin | a (Check A | pplicable |
| (Street) | ΓA G | Λ 3 | 0308 | | | | , | | 3 | | , | y , | | Line) | Form | i filed by On | e Rep | orting Pers | on |
| (City) | (St | | Zip) | n Doriva | tivo 9 | 20011 | ritio | . A oa | uirod | Dic | nocod of | or E | Popo | ficially | · Own | od. | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | tion 2A. Deemed Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | A) or | 5. Amo Securit Benefic | unt of 6. 0 ies For cially (D) Following (I) (| | n: Direct or Indirect ostr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Transa | ction(s) 3 and 4) | | | (111501.44) |
| Common Stock 03/15/2 | | | | | 2022 | | | | S ⁽¹⁾ | | 1,000 | D | \$ | 42.82 | 34 | 4,290 | | D | |
| | | Tal | | | | | | | | | osed of, convertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | Title of 2. 3. Transaction Date Execution Date Execution Date if any | | on Date, | 4. Transaction Code (Instr. 8) | | of Deri Secu Acqu (A) o Disp of (E | osed 0) tr. 3, 4 | 6. Date Exercis Expiration Dat (Month/Day/Ye | | ate Am Year) Sec Uni Del Sec | | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | Price of rivative curity str. 5) | derivative Securities | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownershi (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |

Explanation of Responses:

1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on November 8, 2021.

Remarks:

/s/ Kirk L. Somers

03/16/2022

** 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.