F	FORM 4	μ U	INITED	TES S	ECURITIE				NG	E CC	DMM	SSION							
					Washington, D.C. 20549										OMB APPROVAL				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				EMENT OF CHANGES IN BENEFICIAL OWNE Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								SHIP	Number: ated averag per respon	e burden	3235-0287 0.5				
4 November 1 Address of Describe Description						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer					
1. Name and Address of Reporting Person* Christiansen Andrew					<u>Cardlytics, Inc.</u> [CDLX]								eck all applic Directo	able) r	le) 10% Owner				
(Last) (First) (Middle) C/O CARDLYTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 10/06/2022								X Officer (give title Other (specify below) below) Chief Financial Officer				pecify		
675 PONCE DE LEON AVENUE NE, SUITE 6000					4. If Amendment, Date of Original Filed (Month/Day/Year)							6.1	6. Individual or Joint/Group Filing (Check Applicable						
(Street) ATLANT			0308		Lin														
(City) (State) (Zip)			Zip)																
		Table	e I - Nor	n-Deriv	ative S	ecurities Aco	quired,	Dis	posed o	f, o	r Bene	eficial	ly Owned						
1. Title of Security (Instr. 3) 2. Trans: Date (Month/L			action Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year	Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			(A) or 3, 4 and) or 5. Amount of 4 and Securities Beneficially Owned Foll Reported		6. Owner Form: Dir (D) or Ind (I) (Instr.	ect li irect E 4) C	7. Nature of ndirect Beneficial Dwnership				
						Code	v	Amount	(A) or (D)		Price	Transact (Instr. 3 a	ion(s)			Instr. 4)			
Common Stock 10/06				/2022		М		1,875 ⁽¹⁾ A		\$ <mark>0</mark>	22,	715	D						
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	e 2. Conversion or Exercise Price of Derivative Security		Date, Transaction Code (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	Derivative Security Securities		nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Stock Unit Explanation of Responses:

10/06/2022

(2)

1. Represents the underlying vested shares of common stock of the Issuer which have not been delivered.

2. Each performance stock unit ("PSU") represents a contingent right to receive one share of the Issuer's Common Stock.

3. On October 6, 2021 the Compensation Committee of the Issuer's Board of Directors certified that a target minimum number of advertisers with a specified billings threshold over a trailing 12-month period was achieved (the "October Certification") resulting in the award of the tranche of the PSU grant related to achieving the advertiser count target ("advertiser tranche"). Fifty percent (50%) of the shares subject to the advertiser tranche of the awarded PSU vested upon the October Certification, twenty-five percent (25%) of the shares subject to the advertiser tranche of the awarded PSU vested 6 months after the October Certification, and twenty-five percent (25%) of the shares subject to the advertiser tranche of the October Certification.

Date Exercisable

(3)

Expiration Date

(3)

Title

Commor Stock

Remarks:

Performanc

SEC Form 4



** Signature of Reporting Person

Amount or Number

Shares

1,875

\$<mark>0</mark>

of

Date

0

D

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).

Code ν

Μ

(A) (D)

1,875

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.