1. Name and Address of Reporting Person
   Soroca Adam Lee
   (Last) (First) (Middle)
   C/O MAGNITE, INC.
   1250 BROADWAY, 15TH FLOOR
   (Street)
   NEW YORK NY 10001
   (City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
   MAGNITE, INC. [ MGNI ]

3. Date of Earliest Transaction (Month/Day/Year)
   12/01/2021

4. If Amendment, Date of Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer
   Director
   10% Owner
   Officer (give title below)
   Chief Product Officer
   Other (specify below)

6. Individual or Joint/Group Filing (Check Applicable Line)
   X Form filed by One Reporting Person
   Form filed by More than One Reporting Person

| 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. Transaction Code (Instr. 4) | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock                     | 12/01/2021                  | s(1)            | 20,000 D        | $18.23(1)       | 299,769 D       | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 4) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|                                  |                |                |                |                |                        |                |                        |                |                          |                          |                          |
|                                  |                |                |                |                |                        |                |                        |                |                          |                          |                          |

Explanation of Responses:
1. These sales were made pursuant to a Rule 10b5-1 Trading Plan adopted by the Reporting Person on September 10, 2021.
2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from $18.095 to $18.44, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Remarks:

/s/ Aaron Saltz, attorney-in-fact 12/03/2021
** 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).


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.