FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response	: 0.5							

	Check this box if no longer subject
$\Box$	to Section 16. Form 4 or Form 5
$\cup$	obligations may continue. See
	Instruction 1(b).

## 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		,,,,				inpuny Act t	J. 10 .								
1. Name and Address of Reporting Person* FRANKENBERG ROBERT J						2. Issuer Name <b>and</b> Ticker or Trading Symbol MAGNITE, INC. [ MGNI ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
															X Director			10% Ov	vner	
(Last)	(Fi	rst) (N	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/14/2023									Offic belo	er (give title w)		Other (s below)	specify	
C/O MA	4 If Ar	4. If Amondment Date of Original Elled (Africal Day 8)									6. Individual or Joint/Group Filing (Check Applicable									
1250 BROADWAY, 15TH FLOOR				4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Line)						
,																				
(Street) NEW Y	(Street) NEW YORK NY 10001											Forn Pers	m filed by More than One Reporting son							
					Rule 10b5-1(c) Transaction Indication															
(0)	(0)																			
(City)	(SI	ate) (Z	<u>Zip)</u>		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	l - No	n-Deriva	tive Se	ecui	rities	Acc	ηuired,	Dis	posed of	f, or	Ber	eficia	lly Ow	ned				
1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/				Execution Da			ate,	3. Transac Code (Ir 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				Secui Benef Owne	icially d	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership		
															Follov Repo		(Instr.	4) (	(Instr. 4)	
						Code	v	Amount	(A)	) or )	Price	Trans	action(s) 3 and 4)							
Common	Stock			06/14/20	023				A		13,743 <sup>(1)</sup> A		A	\$0.00	2) 1	119,090		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
				(e.g., pu	ts, cai	ıs, v	varra	ants,	optio	ns, c	convertin	ne s	ecu	rities)						
1. Title of Derivative Security (Instr. 3)	rative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any			ution Date,	4. Transaction Code (Instr. 8)		Secu Acqu (A) o Disp of (D	vative irities uired or osed ) r. 3, 4	6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		f [5]	B. Price of Derivative Gecurity Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y D o (I	0. Ownership Form: Direct (D) r Indirect ) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or Nu of	mber ares						

## Explanation of Responses:

- 1. Represents restricted stock units that vest in full on the earliest of (i) June 14, 2024, (ii) the date of the 2024 annual meeting of the Issuer's stockholders, or (iii) a change of control of the Issuer.
- 2. Granted as compensation for services.

## Remarks:

/s/ Aaron Saltz, attorney-infact 06/16/2023

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- $^{\star\star} \ \text{Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C.\ 1001\ \text{and}\ 15\ \text{U.S.C.}\ 78 \text{ff(a)}.$

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.