1. Name and Address of Reporting Person
   Knopper Douglas S
   (Last) (First) (Middle)
   C/O MAGNITE, INC.
   1250 BROADWAY, 15TH FLOOR
   NEW YORK NY 10001

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

3. Date of Earliest Transaction (Month/Day/Year)
   06/07/2022

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

5. Relationship of Reporting Person(s) to Issuer
   (Check all applicable)
   X Director
   10% Owner
   Officer (give title below)
   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

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>2A. Deemed Execution Date, if any (Month/Day/Year)</th>
<th>3. Transaction Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Acquired Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>06/07/2022</td>
<td></td>
<td>A</td>
<td>16,489(1) A</td>
<td>$0.00 (2)</td>
<td>121,545</td>
<td>D</td>
</tr>
</tbody>
</table>

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

Explanations of Responses:
1. Represents restricted stock units that vest in full on the earliest of (i) June 7, 2023, (ii) the date of the 2023 annual meeting of the Issuer's stockholders, or (iii) a change of control of the Issuer.
2. Granted as compensation for services.

Remarks:

/a/ Aaron Saltz, attorney-in-fact  06/09/2022
** 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).
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.