FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	Check this box if no longer subject
	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

							, .				mpany Act o	J. 20 .0								
1. Name and Address of Reporting Person*				2. Issuer Name <b>and</b> Ticker or Trading Symbol MAGNITE, INC. [ MGNI ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
BARRETT MICHAEL G.					militaria, iivo. [ Moivi ]									X Director				10% O	wner	
(Last)	(Fi	rst) (N	3. Date of Earliest Transaction (Month/Day/Year)									X	Officer (give title below)			Other (specify below)				
C/O MAGNITE, INC.			07/11/2023									CEO								
1250 BROADWAY,15TH FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X Form filed by One Reporting Person					
NEW YO	ORK N	NY 10001													Form filed by More than One Reporting Person				orting	
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication															
											nsaction was nditions of Ru						ritten pl	lan that is in	tended	
		Table	I - N	on-Derivat	tive S	ecui	rities	Acc	quired	, Dis	sposed of	f, or E	Benefic	ially	/ Owr	ned				
1. Title of Security (Instr. 3)  2. Transactio Date (Month/Day/Y				Execution Date,			·	3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				red (A) or str. 3, 4 a	4 and Securi Benefi Owned Follow		cially d ving		: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) o (D)	Price		Transa	Reported Transaction(s) Instr. 3 and 4)						
Common Stock 07/11/20					23				S <sup>(1)</sup>		25,000	D	\$15.0	)2 <sup>(2)</sup> 1,405		05,072		D		
		Tab	ole II	- Derivativ (e.g., put											Owne	ed				
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		cution Date, y	4. Transaction Code (Instr. 8)		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 derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares							

## Explanation of Responses:

- 1. These sales were made pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on March 2, 2023.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$15.01 to \$15.08, 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-

07/13/2023

fact

\*\* 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.