| SEC Form 4 | |
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| FORM 4 | UNITED STATES SECURITIES AND EXCHANGE COMMISSION |

Washington, D.C. 20549

OMB APPROVAL

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| 3235-0287 | | | | | | |
|--------------------------|--|--|--|--|--|--|
| Estimated average burden | | | | | | |
| 0.5 | | | | | | |
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| Check this box if no longer subject Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | | | or sec | uon 30(n) | or the | Investment C | company Act | 01 1940 | | | | | | |
|---|--|--|--|----------------|---------------------------------------|------------------------------|------------------|-----------------------------------|-------------------------------|--|--|---|--|---|-------------------------|-----------|
| | nd Address of LESS TR | Reporting Person* OY | | | | | | ker or Trading C [MCHX | | | | elationship o ck all applic Director | able) | g Pers | on(s) to Issu 10% Ow | |
| (Last) | (F | irst) | (Middle) | | | | Tran | saction (Montl | n/Day/Year) | | > | below) | (give title | | Other (s below) | pecify |
| 1200 5T | ` | | (inidalo) | | 09/28/2023 | | | | | | | Chief Revenue Officer | | | | |
| SUITE 1 | | | | ĺ | 4. If Am | endment, I | Date | of Original File | ed (Month/Da | ay/Year) | 6. In Line) | | oint/Group | Filing | (Check App | licable |
| (Street) | | | | | | | | | | | 2 | Form fil | led by One | e Repo | rting Person | |
| SEATTL | E W | /A | 98101 | | | | | | | | | Form fil Person | | re than | One Report | ing |
| (City) | (S | State) | (Zip) | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | |
| | | | | | Che the | ck this box affirmative o | to ind defens | icate that a transe conditions of | saction was m Rule 10b5-1(| nade pursual c). See Instru | nt to a contraduction 10. | ct, instruction | or written p | lan that | t is intended to | o satisfy |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | |
| Date | | | 2. Transac Date (Month/Da | Execution Date | | Code (Instr. | | | | and 5) Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code V | Amount | (A) o (D) | r Price | Train a setient (s) | | Instr. 4) | | |
| 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 Dat if any (Month/Day/Ye | Cod | saction e (Instr. | | | ies g Security | Derivative Security | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | Cod | e V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | | | |
| Employee Stock Option (right to buy) | \$1.45 | 09/28/2023 | | A | | 300,000 | | (1) | 09/28/2033 | Class B Common Stock | 300,000 | \$0.00 | 300,0 | 00 | D | |

Explanation of Responses:

1. Stock option award effective September 28, 2023 (the "Grant Date"), with 25% of such option shares vesting on the first annual anniversary of the Grant Date and 1/12 of the remainder vesting in equal increments quarterly thereafter over the following three (3) year period, subject to acceleration of vesting in certain events.

Remarks:

| /s/] | Frov | Hart | less |
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| | | | |

<u>10/02/2023</u> Date

** Signature of Reporting Person

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.