## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
STATEMENT OF CHANGES IN BENEFICIAL OWNERSH	łIР

	OMB APPROVAL								
	OMB Number:	3235-0287							
	Estimated average to	ourden							
- 1	hours por response.	0.5							

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	005-1(c). See I	istruction to.																			
1. Name and Address of Reporting Person* FROST PHILLIP MD ET AL						2. Issuer Name and Ticker or Trading Symbol Fluent, Inc. [ FLNT ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Officer (give title below)  Officer (specify below)						
(Last) (First) (Middle) 4400 BISCAYNE BLVD						3. Date of Earliest Transaction (Month/Day/Year) 12/09/2024															
(Street) MIAMI FL 33137					—   <del>,</del>	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person						
(City)	3)	State)	(Zip)		-									٧	/ Form file	ed by M	lore than	One Re	portin	g Person	
		1	Table I - N	on-D	eriva	tive S	Secu	ırities A	cquire	d, D	isposed	of, or Be	nefic	ially	Owned						
Date			Date		/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr.		es Acquired Of (D) (Instr.		and 5) Securities Beneficiall Owned Fol			6. Owner Form: D (D) or In (I) (Insti	Direct ndirect	Indir Bend Own	7. Nature of Indirect Beneficial Ownership		
						$\perp$				v	Amount	(A) or (D)	Price	,	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock			12/0	2/09/2024				x		647,892	2 A	\$0.0	0005	4,378,0	,056		I F		d by st mma estments		
Common	nmon Stock						1						8,334	4	D		Trust <sup>(1)</sup>				
			Table II								posed of				wned		•		•		
1. Title of	2.	3. Transaction 3A. Deeme			4.		·	umber of			sable and	7. Title and			8. Price of	9. Nun	umber of 10.			11. Nature	
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution D if any (Month/Day/			nsaction de (Instr.				on Dat Day/Ye		Securities Underl Derivative Securi (Instr. 3 and 4)			Derivative Security (Instr. 5)	derivat Securit Benefic Owned Followi Report Transa	ities icially d ving ted	Owners Form: Direct or India (I) (Inst	(D) rect	of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amour Numbe Shares	er of		(Instr.					
Pre- Funded Warrant	\$0.0005	12/09/2024			x	x		647,892	12/09/2024 <sup>(2)</sup>		(3)	Common Stock	647,892(2)		\$0	0		I		Held by Frost Gamma Investment Trust <sup>(1)</sup>	
		Reporting Person* PMDETAL														•					
(Last) 4400 BI	SCAYNE B	(First)	(Mid	dle)			,														
(Street) MIAMI		FL	331	37																	
(City)		(State)	(Zip)																		
		Reporting Person* <u>vestments Tr</u>																			
(Last) 4400 BIS	SCAYNE B	(First)	(Mid	dle)																	
1																					

## Explanation of Responses:

FL

(State)

33137

(Zip)

(Street)
MIAMI

(City)

2. The Pre-Funded Warrants were immediately exercisable when issued. The Pre-Funded Warrants were exercised on December 9, 2024.

3. The Pre-Funded Warrants will terminate when exercised in full.

/s/ Phillip Frost, M.D., 12/11/2024 <u>Individually</u> /s/ Phillip Frost, M.D., as <u>Trustee</u>

12/11/2024

\*\* 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).
- \*\* 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.