FORM 4

Check this box if no longer subject

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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Estimated average burden
hours per response: 0.5

to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).
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. Name and Address of Reporting Person* Patrick Donald Huntley						2. Issuer Name and Ticker or Trading Symbol Fluent, Inc. [ FLNT ]									k all app Direc	licable) tor	Ū	rson(s) to Is	vner
(Last)	(Fi JENT, INC	First) (Middle)			3. Date of Earliest Transaction (Month/Da 12/11/2023						/Day/Year)			<b>V</b>	belov	er (give title v) Chief Exec		Other (s below) e Officer	specify
300 VESEY STREET, 9TH FLOOR						4. If Amendment, Date of Original Filed (Month/Day/Year) 12/13/2023								6. Individual or Joint/Group Filing (Check Applicable Line)					.
(Street) NEW YO	(Street) NEW YORK NY 10282													<b>V</b>	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication  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 I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)						Exec if any	Deemed ution Date, / th/Day/Year)				es Acquired (A) Of (D) (Instr. 3, 4		4 and Securi Benefi Owned		ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pri	се		ted action(s) 3 and 4)			(Instr. 4)
Common Stock 12/11/2					2023				P <sup>(1)</sup>		15,000	A	A \$4.9 <sup>(2)</sup>		1,477,200(3)			D	
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)	tive Conversion Date Execution or Exercise (Month/Day/Year) if any							6. Date Exercisable and Expiration Date (Month/Day/Year)		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In:	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	Beneficial Ownership ct (Instr. 4)	
					Code	v			Date Exercisable		Expiration Date	Title	Number of Shares						

## Explanation of Responses:

- 1. The Reporting Person is amending the Form 4 to correct the transaction code for the reported transaction.
- 2. The price listed in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$0.480 to \$0.490, inclusive. The Reporting Person undertakes to provide Fluent, Inc., any Fluent, Inc. security holder, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.
- 3. The Reporting Person is amending the Form 4 to correctly report, in Table I, Column 5, the securities beneficially owned by the Reporting Person after the reported transaction.

/s/ Donald Patrick

07/01/2024

\*\* 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.