FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 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 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*  Ehrhart Tom  |   |  |  | 2. Issuer Name and Ticker or Trading Symbol Vivid Seats Inc. [ SEAT ] |   |                                      |  |   |  |                 |  |   | k all applic<br>Directo           | able)<br>r   | g Pers  | son(s) to Iss | vner   |   |  |
|--|---|--|--|---|---|--------------------------------------|--|---|--|-----------------|--|---|-----------------------------------|--|---|---------------|--|---|--|
| (Last)   | (Last) (First) (Middle) C/O GTCR LLC                                  |  |  |   | 3. Date of Earliest Transaction (Month/Day/Year) 06/07/2022 |                                      |  |   |  |                 |  |   |                                   | Officer<br>below)                                  | (give title   |               | Other (<br>below)  | specify                                 |  |
| 300 NORTH LASALLE STREET, SUITE 5600   |   |  |  | 4. If Amendment, Date of Original Filed (Month/Day/Year)              |   |                                      |  |   |  |                 |  | 6. Individual or Joint/Group Filing (Check Applicable |                                   |  |   |               |  |   |  |
| (Street)   | Street)<br>CHICAGO IL 60654   |  |  |   |   |                                      |  |   |  |                 |  | Line)<br>X  | ,                                 |  |   |               |  |   |  |
| (City)   | (S  | tate)                                      | (Zip)  |   |   |                                      |  |   |  |                 |  |   |                                   |  |   |               |  |   |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |   |  |  |   |   |                                      |  |   |  |                 |  |   |                                   |  |   |               |  |   |  |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)   |   |  |  | Execution Date,   |   | Transaction Disposed Code (Instr. 5) |  | ities Acquired (A) o<br>d Of (D) (Instr. 3, 4 a |  | or<br>and       | 5. Amour<br>Securitie<br>Beneficia<br>Owned F<br>Reported                                    | es For<br>ally (D)<br>Following (I) (I                |                                   | vnership<br>n: Direct<br>r Indirect<br>str. 4)     | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)   |               |  |   |  |
|  |   |  |  |   |   |                                      | Code   | v   | Amount   | (A) or<br>(D) P |  | се  | Transact                          | ransaction(s)<br>Instr. 3 and 4)                   |   |               | (111341. 4)  |   |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |  |   |   |                                      |  |   |  |                 |  |   |                                   |  |   |               |  |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Da<br>if any<br>(Month/Day/Y | Co  | ansaction<br>ode (Instr.                                    |                                      | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D) (Instr.<br>3, 4 and 5) |   | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                 | 7. Title and Amoun<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |   | [                                 | 3. Price of<br>Derivative<br>Security<br>Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | lly           | Ownershi<br>Form:<br>Direct (D)<br>or Indirec<br>(I) (Instr. 4 | Beneficial<br>Ownership<br>t (Instr. 4) |  |
|  |   |  |  | Co  | ode V   | ,                                    | (A)  | (D)   | Date<br>Exercisab  |                 | expiration<br>Date   | Title   | Amou<br>or<br>Numb<br>of<br>Share | oer  |   |               |  |   |  |
| Restricted<br>Stock<br>Units   | (1)   | 06/07/2022                                 |  |   | A   |                                      | 18,079   |   | (2)  |                 | (2)  | Class A<br>Common<br>Stock                            | 18,0                              | 79   | \$0.00  | 18,079        | )  | D                                       |  |

## **Explanation of Responses:**

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of the Issuer's Class A Common Stock.
- 2. The RSUs vest on the earlier of (i) June 7, 2023 and (ii) one day prior to the Company's 2023 annual meeting of shareholders, subject to the Reporting Person's continued service with the Issuer through such

## Remarks:

/s/ David Morris, 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.

- $^{\star}$  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.