FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEFIC	IAL OWNERS	SHIP

OMB APPROVAL											
OMB Number:	3235-0287										
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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

Name and Address of Reporting Person*  Chia Standay				2. Issuer Name and Ticker or Trading Symbol Vivid Seats Inc. [ SEAT ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>Chia Stanley</u>				[								X	Directo	r	10% Owne		ner			
(Last)	(Fi	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/19/2024						X	X Officer (give title below)			Other (specify below)				
C/O VIVID SEATS INC.				01/	01/19/2024 Chief Executive Officer															
24 E. WASHINGTON STREET, SUITE 900				4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc	6. Individual or Joint/Group Filing (Check Applicable Line)						
				1										X	X Form filed by One Reporting Person					
(Street) CHICAC	GO IL	,	60602													Form filed by More than One Reporting Person				
(City)	(Si	tate)	(Zip)		Ri	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.														
		Tab	ole I - Nor	n-Deriv	ativ	e Se	curit	ies Ac	qui	ired, C	Disp	osed o	f, or Be	enet	ficially	y Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,		,	Transaction Dispose Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4 a			Beneficially Owned Follow		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Ī	Code	v	Amount	(A) (D)	or	Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Class A Common Stock 01/1			01/19	9/2024			M		15,625 A		(1)	325,402			D					
		7	Table II -													Owned				
				(e.g., p	outs,	calls	s, wa	arrants	s, o <sub>l</sub>	ptions	s, c	onverti	bie sec	urit	ies)					
Derivative   Conversion   Date   Execution Date,   Security   or Exercise   (Month/Day/Year)   if any				ransaction of ode (Instr. Derivative			Exp	6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)				curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
														or						
				,	Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	of	umber nares					
Restricted Stock Units	(1)	01/19/2024			M			15,625		(2)		(2)	Class A Common Stock	15	5,625	\$0	109,37	75	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 have vested and settled or will vest and settle, as applicable, in 16 equal quarterly installments beginning on January 19, 2022, such that the RSUs will become fully vested on October 19, 2025. The RSUs do not have an expiration date.

/s/ Stanley Chia

01/23/2024

\*\* 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.