FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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ton, D.C. 20549	OMB AF
	II -

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

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

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours per response	0.5								

for the purch securities of intended to	traction of written planase or sale of equity the issuer that is satisfy the affirmative ditions of Rule 10b5-struction 10.	<i>'</i>											
1. Name and Address of Reporting Person*				ssuer Name <b>and</b> Tick				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Benson David C				oendoor Techno	ologies in	C. [ OPEN ]	<b>V</b>	Director	10% (	Owner			
(Last) 410 N. SCO	(First) FTSDALE ROA	(Middle)	09/	Date of Earliest Trans 111/2024	action (Month	/Day/Year)		Officer (give title below)	Other below	(specify )			
			4. If	Amendment, Date o	f Original Filed	d (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) TEMPE AZ 85288							Form filed by One Reporting Person						
,	1VL	03200						Form filed by Mo Person	ore than One Re	porting			
(City)	(State)	(Zip)											
		Table I - Nor	n-Derivative	Securities Acq	uired, Dis	posed of, or Bene	ficially	Owned					
1. Title of Security (Instr. 3) 2. Transact Date			2. Transaction Date	2A. Deemed Execution Date,	3. Transaction	4. Securities Acquired (AD Disposed Of (D) (Instr. 3		5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect			

	(Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code ( 8)		5)			Owned Following	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock	09/11/2024		A		78,432(1)	A	\$0	78,432	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	ate, Transac Code (Ir		Transaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)	rect cial ship
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

## **Explanation of Responses:**

1. Represents an equal number of restricted stock unit ("RSU") award granted to the Reporting Person pursuant to the Issuer's non-employee director compensation policy and subject to time-based vesting. Each RSU represents a contingent right to receive one share of the Issuer's common stock. The RSUs fully vest on the earlier to occur of (a) the date of the Issuer's next annual meeting of stockholders or (b) September 11, 2025, in each case subject to the Reporting Person's continued service to the Issuer as a non-employee director through the applicable vesting date.

## Remarks:

/s/ Carrie Wheeler, Attorneyin-fact

09/12/2024

\*\* 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.