FORM 4

☐ 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 that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

hours per response... 0.5 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *				2.	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Olivan Javier				M	Meta Platforms, Inc. [META]												
				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							Director			% Owner	1.1.	
					12/17/2024								X_ Officer (give title below) Other (specify below) Chief Operating Officer				
C/O META PLATFORMS, INC., 1 META WAY					12/16/2024								8				
	(Stree	et)			4.	If An	nendme	ent, Date (Orig	inal File	d (MM/D	D/YYYY	7) 6. Individual	or Joint/G	roup Filing	(Check App	licable Line)
MENLO PAI	RK, CA 9	4025											X Form filed b	y One Repor	rting Person		
(Ci	ity) (Stat	e) (Zip	o)										Form filed by	More than (One Reporting	Person	
			Table	I - N	on-De	rivati	ive Sec	urities Ac	caui	red. Dis	posed o	f, or B	eneficially Owne	ed			
1.Title of Security					s. Date	2A. D	eemed	3. Trans. Co	•	4. Secur	ities Acqui	ired (A)	5. Amount of Securit	ies Beneficia		6.	7. Nature
(Instr. 3)				Execution Date, if any		(Instr. 8)		or Disposed of (D) (Instr. 3, 4 and 5)			Following Reported Transaction(s) (Instr. 3 and 4)			Form:	of Indirect Beneficial Ownership		
											(A) or		1				(Instr. 4)
								Code	V	Amount	(A) 61 (D)	Price				(1) (Histi: 4)	
Class A Common Sto	ock			12/16	/2024			$S^{(1)}$		413	D	\$629.56			18,340	D	n 0"
Class A Common Sto	ock														8,622	I	By Olivan D LLC (2)
Class A Common Sto	ock														2,999	I	By Olivan Reinhold D LLC (3)
Class A Common Sto	ock														8,622	I	By Reinhold D LLC (4)
Class A Common Ste	ock														75,044	I	By Olivan Reinhold Family Revocable Trust u/a/d 10/16/12 (5)
	Tabl	e II - Der	ivative	e Seci	ırities	Bene	ficially	y Owned	(e.g.	, puts, o	alls, wa	ırrants	s, options, conver	tible secu	ırities)		
1 1 1 1		4. Trans (Instr. 8)	Acq Disp				and Expiration Date			and Amount of ies Underlying tive Security 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form of	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	V	(A)	(D)		nte cercisable	Expiratior Date		Amount or Number of Shares		Transaction(s (Instr. 4)		

Explanation of Responses:

- (1) The sale reported was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 30, 2023.
- (2) Shares held of record by the reporting person, manager of Olivan D LLC.
- (3) Shares held of record by the reporting person and his spouse, managers of Olivan Reinhold D LLC.
- (4) Shares held of record by the reporting person's spouse, manager of Reinhold D LLC.
- (5) Shares held of record by the reporting person and his spouse, Co-Trustees of the Olivan Reinhold Family Revocable Trust u/a/d 10/16/12.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Olivan Javier C/O META PLATFORMS, INC. 1 META WAY			Chief Operating Officer					
MENLO PARK, CA 94025								

Signatures

/s/ Erin Guldiken, attorney-in-fact for Javier Olivan	12/18/2024		
**Signature of Reporting Person	Date		

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 control number.