### 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.

OMB APPROVAL
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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## 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. I	2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Olivan Javier				M	Meta Platforms, Inc. [ META ]												
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)							Director			Owner		
												"	X_ Officer (give title below) Other (specify below)  Chief Operating Officer				
C/O META PLATFORMS, INC., 1						1/22/2024							Ciliei Operat	ing Offic	CI		
META WAY																	
	(Stree	et)			4. I	f Am	endme	nt, Date (	Origii	nal File	l (MM/DI	D/YYY	Y) 6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)
MENLO PARK, CA 94025												X Form filed b	X _ Form filed by One Reporting Person				
(C	ity) (Stat	e) (Zip	)			1							Form filed by	Form filed by More than One Reporting Person			
			Table I	I - No	n-Der	ivati	ve Secı	ırities Ac	quir	ed, Dis	osed o	f, or E	Seneficially Owner	ed			
1. Title of Security (Instr. 3)			s. Date	Execution		3. Trans. Code (Instr. 8)					Following Reported Transaction(s)			6. Ownership			
				Date,	if any			(Instr. 3, 4 and 5)							Beneficial Ownership		
											(A) or		7			or Indirect (I) (Instr.	(Instr. 4)
								Code	V	Amount	(A) 61 (D)	Price				(1) (IIIsti. 4)	
Class A Common St	ock			1/22/2	2024			$S^{(1)}$		4,500	D	\$387.	3		84,435	D	
Class A Common St	ock			1/22/2	2024			S <sup>(1)</sup>		4,500	D	\$39	)		79,935	D	
Class A Common Stock													8,622	I	By Olivan D LLC (2)		
Class A Common St	ock														2,999	I	By Olivan Reinhold
CAMSS 11 COMMING ST															_,,,,,	-	D LLC (3)
Class A Common St	ock														8,622	I	By Reinhold D LLC (4)
D'ELC																	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
		n (I	Trans. nstr. 8)					and Expiration Date Securities			and Amount of ies Underlying	Jnderlying Derivative		10. Ownership			
			Acquired (A) Disposed of (Instr. 3, 4 ar			of (D)				tive Security 3 and 4)	Security (Instr. 5)	Securities Beneficially Owned Following	Derivative Security: Direct (D)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Dat Exe	e ercisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (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.

#### Reporting Owners

Deporting Over an 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	1/24/2024	
**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.