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.

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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. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
 Englebardt S	amuel El	li		il	Iear	tMedi	ia, Inc. [IH	RT]					,			
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							X_ Director10% Owner					
												Officer (give title below) Other (specify below)					
20880 STONE OAK PARKWAY						6/5/2024											
	(Stree	et)		4.	If An	nendme	nt, Date O	rigii	nal File	d (MM/DI	D/YYY	YY)	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
SAN ANTONIO, TX 78258												X _ Form filed by One Reporting Person					
(City) (State) (Zip)												Form filed by More than One Reporting Person					
			Table I	- Non-De	rivati	ive Seci	urities Acc	quir	ed, Dis	sposed o	f, or	Ben	neficially Owne	d			
1. Title of Security (Instr. 3)			Trans. Date	ate 2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquir or Disposed of (D) (Instr. 3, 4 and 5)			Í	5. Amount of Securit Following Reported (Instr. 3 and 4)	ities Beneficially Owned Transaction(s)		Ownership of Form:	Beneficial Ownership	
							Code	V	Amou	nt (A) o	r Pri	ice				(I) (Instr. 4)	
Class A Common Stock, par value \$0.001 per share 6/5/2024				6/5/2024			A		145,631	(<u>1</u>) A	\$1.	03			266,135	D	
Class A Common Stock, par value \$0.001 per share 6/5/2024				6/5/2024			A		145,631	(2). A	:	\$0			411,766	D	
	Tabl	e II - Der	ivative S	Securities	Bene	eficially	Owned (e.g.,	puts,	calls, wa	rran	ts, o	options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	rrity Conversion Date Execution (In			(Instr. 8		Acquire Dispose	ve Securities d (A) or	and	D. D			rities vative r. 3 ar	Underlying	Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)		ercisable		Title	Sha			(Instr. 4)	(1) (HISU. 4)	

Explanation of Responses:

- (1) Represents deferred stock units ("DSUs") in lieu of cash compensation. Each DSU represents a contingent right to receive one share of Class A Common Stock. The DSUs are fully vested as to one-quarter and shall vest as to one-quarter on each of June 30, 2024, September 30, 2024 and December 31, 2024. Settlement of the DSUs has been deferred until within 45 days of the earliest to occur of (i) the Reporting Person's separation from service, (ii) a change in control, (iii) the Reporting Person's death, or (iv) the Reporting Person's disability.
- (2) Represents DSUs. Each DSU represents a contingent right to receive one share of Class A Common Stock. The DSUs shall vest in full on the earlier of June 5, 2025 or the Company's 2025 annual meeting of stockholders. Settlement of the DSUs has been deferred until within 45 days of the earliest to occur of (i) the Reporting Person's separation from service, (ii) a change in control, (iii) the Reporting Person's death, or (iv) the Reporting Person's disability.

Reporting Owners

Panarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Englebardt Samuel Eli							
20880 STONE OAK PARKWAY	X						
SAN ANTONIO, TX 78258							

Signatures

**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.