FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-028									
Estimated average burden										

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Schulke Ryan				2. Issuer Name and Fluent, Inc. [ding Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner								
(Last) C/O FLUENT,	(First)	(Mid		3. Date of Earliest 05/19/2023	Transacti	on (M	Ionth/Day/Yea		X Officer (give title below) Chief Strategy Officer								
300 VESEY ST	4. If Amendment, D	ate of Or	igina	l Filed (Month		ndividual or Joint/G	roup Filing (Ch	eck Applicable									
(Street) NEW YORK NY 10282									X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	City) (State) (Zip)				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.												
	Tá	able I -	Non-Derivati	ve Securities	Acquir	ed,	Disposed	of, or	Benefici	ally Owned							
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities	Acquire		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code V		Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(11341.4)	(iiisti. 4)					
Common Stock			05/19/2023		P		40,000	A	\$0.6953 ⁽¹⁾	272,500	I	Held by The Schulke Inn Family Foundation Trust in which the Reporting Person serves as Co- Trustee.					
Common Stock										7,480,368	D						
Common Stock										2,000,000	I	Held by RSMC Partners, LLC, of which the Reporting Person is a member.					
Common Stock										725,001	I	Held by The Ryan Schulke 2020 GRAT, of which the Reporting Person is Trustee.					

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)	4. Transac Code (II 8)		5. Numl of Deriv Secu Acqu (A) o Dispo of (D) (Instr	rative rities ired r osed)	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)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These share were bought in multiple transactions at prices ranging from \$0.67774 to \$7000, inclusive. The reporting person undertakes to provide Fluent, Inc., any Fluent, Inc., security holder or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.

<u>/s/ Ryan Schulke</u> <u>05/23/2023</u>

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).