## 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										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
   KAPLAN D	AVID B				Ar	res N	Manag	gement (	Cor	<b>p [ A</b> ]	RES ]			Check an app	nicaoic)				
				3 1	3. Date of Earliest Transaction (MM/DD/YYYY)								X_ Director	X_ Director 10% OwnerX_ Officer (give title below) Other (specify below)  Co-Founder					
(Last) (First) (Middle)					J. 1	5. Date of Earnest Transaction (MIW/DD/1111)							_X_ Officer (gi						
1800 AVENUE OF THE STARS, SUITE					,	11/13/2024													Co-Founder
1100	(Stre	et)			4. I	lf An	nendme	nt, Date O	rigin	nal File	d (MM/D	D/YY	YY)	6. Individual o	or Joint/G	roup Filing	Check Appl	icable Line)	
LOS ANGEI		90067												X Form filed by		ting Person One Reporting P	erson		
(C	ity) (Sta	te) (Zi	p)													one responding r			
			Table						•		•			neficially Owne					
1.Title of Security (Instr. 3) 2. Trans			2. Trans.	Date	Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquir or Disposed of (D) (Instr. 3, 4 and 5)			_	5. Amount of Securit Following Reported (Instr. 3 and 4)	ties Beneficially Owned Transaction(s)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	V	Amou	nt (A)		rice				(I) (Instr. 4)	(Insui I)	
Class A Common St	ock			11/13/2	024			G		30,000	) (1) (2) D	ı	\$0			1,150,052 (2)	I	By Ares Owners Holdings L.P. (3)	
	Tab	le II - Dei	rivativo	e Secur	ities	Bene	ficially	Owned (	e.g.,	puts, c	alls, wa	ırran	ıts,	options, conver	tible secu	ırities)			
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	3. Trans. Date			Trans. istr. 8)	Acqu Disp		mber of ative Securities red (A) or sed of (D) 3, 4 and 5)					ritie vativ	and Amount of es Underlying ve Security and 4)	8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D)	Beneficial	
					Code	V	(A)	(D)	Date	e rcisable	Expiratior Date	Title		mount or Number of nares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)		

#### **Explanation of Responses:**

- (1) Represents the number of shares of Class A Common Stock previously held by Ares Owners Holdings L.P. ("AOH") on behalf of the reporting person or a vehicle controlled by him, which were gifted on November 13, 2024 to a charitable foundation of which the reporting person is a trustee.
- (2) The shares of Class A Common Stock are subject to a lock-up agreement pursuant to which they cannot be sold prior to November 22, 2024 without the consent of Morgan Stanley & Co. LLC and Citigroup Global Market Inc., subject to certain exceptions.
- (3) The reporting person or a vehicle controlled by him is a limited partner in AOH, the direct holder of the shares of Class A Common Stock. The shares of Class A Common Stock indirectly held by the reporting person or the vehicle are the number of shares of Class A Common Stock that he or the vehicle has a right to receive as a limited partner in AOH.

### **Reporting Owners**

Paparting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
KAPLAN DAVID B 1800 AVENUE OF THE STARS SUITE 1400 LOS ANGELES, CA 90067			Co-Founder					

### **Signatures**

/s/ Anton Feingold, by power of attorney

\*\*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.