FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
washington,	D.C.	20049

STATEMENT	OF CHANGE	S IN BENEFI	CIAL OWNE	ERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours nor roomanas:	0.5							

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person Shanmugasundaram Kulesh					2. Issuer Name and Ticker or Trading Symbol Angi Inc. [ANGI]								(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Own V Officer (give title Other (spe					
(Last)	,	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/19/2022								X	X Officer (give title Other (sp below) below) Chief Technology Officer				pecity	
3601 WALNUT STREET, SUITE 700 4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable										
(Street)	R C	0	80205								Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				.				
(City)	(S	tate)	(Zip)			Person													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
			2. Transac Date (Month/Da	nsaction h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.					5. Amoun Securities Beneficial Owned Fo	lly	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
											Amount	nt (A) or Pr		ice				Reported Transaction(s) (Instr. 3 and 4)	
Class A Common Stock, par value \$0.001 ⁽¹⁾ 04					0/2022			М		12,706	A		\$ <mark>0</mark>	69,347		D			
Class A Common Stock, par value \$0.001 ⁽²⁾ 04/19				04/19/	1/2022			F ⁽²⁾		4,581	D	\$	\$5.25		64,766		D		
	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		3A. Deemed Execution Date if any (Month/Day/Yea	Cod	Transaction Code (Instr.		of E		6. Date Exercisable ar Expiration Date (Month/Day/Year)		e and 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Cod	le V	(A)	(D)	Date Exer	cisable		kpiration ate	Title	or Nu of	nount mber ares					
Restricted Stock Units ⁽³⁾	\$0.0	04/19/2022		М			12,706	04/19	9/2022 ⁽³) 10)/19/2024 ⁽³⁾	Class A Common Stock, par value	12	,706	\$0	63,53	2	D	

Explanation of Responses:

- 1. Represents shares of ANGI Class A common stock acquired upon the vesting of restricted stock units (see footnote 3 below).
- 2. Represents shares of ANGI Class A common stock withheld to cover the payment of taxes due in connection with the vesting of restricted stock units (see footnote 3 below).
- 3. Represents unvested restricted stock units that vested/vest in six equal bi-annual installments commencing on April 19, 2022 and ending on October 19, 2024, subject to continued service.

Remarks:

Shannon M. Shaw as Attorneyin-Fact for Kulesh 04/19/2022

<u>Shanmugasundaram</u>

** Signature of Reporting Person Date

owned directly or indirectly

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 Number.