SEC For	m 4 FORM	4	UNITEI) STA	TES	S SE	CUI	RITI	ES ANI	DE	ХСНА	NG	EC	омм	ISSION				
						Washington, D.C. 20549											OMB APPROVAL		
Section 16. Form 4 or Form 5 obligations may continue. See					T OF CHANGES IN BENEFICIAL OWNERSHI											OMB Number: 323 Estimated average burden hours per response:			3235-0287 en 0.5
1. Name and Address of Reporting Person [*] Jisser Ken					2. Issuer Name and Ticker or Trading Symbol authID Inc. [AUID]									(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last)	, , , , , , , , , , , , , , , , , , , ,					3. Date of Earliest Transaction (Month/Day/Year) Officer (gi below)										give title Other (specify below)			
C/O AUTHID INC. 1580 N. LOGAN STREET SUITE 660 UNIT 51767													Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) DENVE	Street) DENVER CO 80203				Form filed by More than One Reporting Person														
(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.								ed to										
		Tab	le I - Noi	n-Deriv	ative	e Sec	curiti	es A	cquired,	Dis	posed o	of, o	r Ben	eficia	ly Owned	ł			
1. Title of Security (Instr. 3) 2. Transac Date (Month/D					Execution Date,			, Transaction Dispose Code (Instr. 5)		rities Acquired (A) o ed Of (D) (Instr. 3, 4 a			Benefic Owned	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v			(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock, \$0.0001 par value per share 05/20,				/2024	024		Р		5,500	,500 A \$		\$7.64	(3) 43,475			D			
		7							quired, D s, option						/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code (3)	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year) of Se Unde Deriv		. Title and Amou f Securities nderlying erivative Securi nstr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title		Amount or Number of Shares					
Stock	\$5.48								06/28/2023	3 0	6/28/2033	Com Sto \$0.0	ck,	25,000		3,125		D	

Explanation of Responses:

\$2.64

Stock

Options⁽²⁾

Options⁽¹⁾

1. The shares underling the stock options vest over a period of 12 months.

2. The shares vest annually in equal amounts over a three-year period.

3. Reflects the weighted average purchase price. The range of prices for such transactions is \$7.47 to \$7.70. Open market purchase transactions were made on the same day at different prices through a trade order executed by a broker-dealer. The reporting person has reported on a single line all such transactions that occurred within a one dollar price range. The reporting person hereby undertakes to provide upon request by the Securities and Exchange Commission staff, the issuer or a shareholder of the issuer, full information regarding the number of shares sold at each separate price.

03/14/2023

03/14/2033

/s/ Ken Jisser	05/22/2024
** Signature of Reporting Person	Date

12,500

par value per share Common Stock, \$0.0001

par value per share 12,500

D

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.