FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

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1. Name and Address of Reporting Person* Gorriz Michael A						2. Issuer Name and Ticker or Trading Symbol authID Inc. [AUID]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O AUTHID INC. 1385 S. COLORADO BLX				/D.,	3. Date of Earliest Transaction (Month/Day/Year) 09/30/2022									Officer below)	(give title Resigne	X ed 3/9	below)		
BUILDING A, SUITE 322					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) DENVER CO 80222													X Form filed by One Reporting Person 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														
											ction was male 10b5-1(c			tract, instruction	n or written p	olan tha	at is intended	I to satisfy	
		Tab	le I - Nor	ı-Deriv	vative	e Se	curit	ies Ac	quired,	Dis	posed o	f, or Be	neficia	lly Owned					
1. Title of Security (Instr. 3) 2. Trans Date (Month/l							2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.		4. Securities Acquired Disposed Of (D) (Instr. 5)			d Securition Benefici Owned I	5. Amount of Securities Beneficially Owned Following		vnership i: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) c (D)	r Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock, \$0.0001 par value per share 01/03					3/202	3/2023			M		815(2)) A	\$2.9	9 2,	2,856		D		
Common Stock, \$0.0001 par value per share 09/30						/2022		M		815(2)) A	\$2.9	99 2,	2,041		D			
		7	Table II - I								osed of, onvertik			/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercisable an Expiration Date (Month/Day/Year)		able and	7. Title a of Secur Underlyi	nd Amoun ties ng e Security	Derivative Security	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.		Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares	1					
Stock Options ⁽¹⁾	\$3.03	03/09/2023			D			20,397	09/20/20	22 (09/20/2032	Common Stock, \$0.0001 par value per share	20,39	7 \$3.03	14,56	9	D		
Senior Secured Convertible Note	\$3.7								03/21/20	22	03/21/2025	Common Stock, \$0.0001 par value per share	27,02	7	27,02	7	D		
Stock Options	\$15.16								12/29/20	21	12/29/2031	Common Stock, \$0.0001 par value per share	10,238	3	10,23	8	D		
Stock Options ⁽¹⁾	\$7.8	03/09/2023			D			20,833	06/09/20	21	06/09/2031	Common Stock, \$0.0001 par value per share	20,833	\$7.8	41,66	7	D		

Explanation of Responses:

- 1. Represents lapse of options on resignation as Director.
- 2. The reporting person received shares of common stock as payment of interest for each quarter associated with the Senior Secured Convertible Note dated March 21, 2022.

Remarks:

/s/ Michael A. Gorriz

03/21/2023

** 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 Number.