FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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	OMB APPROVAL										
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l	OMB Number:	3235-0287									
l	Estimated average burden										
l	hours per response	: 0.5									

	Check this box if no longer subject
\Box	to Section 16. Form 4 or Form 5
\cup	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

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Name and Address of Reporting Person* Blumenthal Neil Harris					2. Issuer Name and Ticker or Trading Symbol Allbirds, Inc. [BIRD]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Diamendial Iven Harris															X Dire	ector		10% O	wner		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023									Offic belo	cer (give title ow)		Other (below)	specify			
C/O ALLBIRDS, INC.						A 16 A second second Data of Original Filed (Month 12 A)								6 1	C. Individual or Jaint/Craus Filing (Chaels Applicable						
730 MONTGOMERY STREET					If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
/ 50 INDIVIGUIMENT STREET															X Form filed by One Reporting Person						
(Street)	CISCO CA 941														Form filed by More than One Report Person						
FRANC					Rule 10b5-1(c) Transaction Indication																
(City)	(Si	rate) (Z	Zip)		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.																
		Table	I - No	n-Deriva	tive S	ecui	rities	Acq	uired,	Dis	posed of	f, or	r Ben	eficia	lly Ow	ned					
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day					Execution Date,			,	Transaction Disposed Of (I Code (Instr. 5)			es Acquired (A) Of (D) (Instr. 3, 4			Secu Bene Owne Follo	ficially ed wing	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		rted saction(s) . 3 and 4)					
Class A Common Stock 06/09/20						2023			A		58,593((1) A S		\$ <mark>0</mark>	89,080			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)	titive Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Number of Deriva Securi Acquir (A) or Dispos of (D) (Instr. and 5)	tive ities red sed	Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		3. Price of Derivative Security Instr. 5)		y G	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nun of	ount nber res							

Explanation of Responses:

1. Each share is represented by a restricted stock unit ("RSU"). Each RSU represents a contingent right to receive one share of the Issuer's Class A Common Stock upon settlement. 100% of the RSUs shall vest on the earlier to occur of June 9, 2024 and the date of the Issuer's next annual meeting of stockholders, subject to the Reporting Person's Continuous Service (as defined in the Issuer's 2021 Equity Incentive Plan) through the applicable vesting date.

Remarks:

/s/ Joseph Vernachio, Attorney-in-Fact

06/13/2023

** 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.