| SEC For | m 4 | | | | | | | | | | | | | | | | | |
|--|---|---|---|--|--|--|---|---------------------------------------|--|------------------|--|-----------------------------------|--------------------|--|---|---|--|--|
| | FORM | 4 | UNITED | STAT | ES S | SECI | | ES AN | | | NGE | CON | IMIS | SION | | | | |
| 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 | | | | | | | | | | | OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5 | | |
| transac contrac the pur securit intende defens | chase or sale of les of the issue ed to satisfy the | pursuant to a written plan for of equity r that is | | | | | | | | | | | | | | | | |
| 1. Name and Address of Reporting Person* DAVERN ALEXANDER M | | | | | | | | | | | | | | tionship o all applic Directo | cable) | son(s) to Iss 10% Ov | | |
| (Last) (First) (Middle) C/O FARO TECHNOLOGIES, INC | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/01/2024 | | | | | | | | | Image: Director 10% Owner Officer (give title below) Other (specify below) | | | | |
| 125 TECHNOLOGY PARK (Street) LAKE MARY FL 32746 | | | | | Line) | | | | | | | | | iled by One iled by Mor | int/Group Filing (Check Applicable ed by One Reporting Person ed by More than One Reporting | | | |
| (City) | (S ⁻ | ate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tab | le I - Non- | Derivat | tive S | ecuri | ties A | cquired, | Dis | posed o | of, or B | enefic | ially | Owneo | k | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year | | , Transaction Disp Code (Instr. 5) | | Dispose | ecurities Acquired (A) o osed Of (D) (Instr. 3, 4 a | | | 5. Amou Securitie Beneficia Owned F Reported | es For ally (D) Following (I) (| | rm: Direct or Indirect (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount | (A) (D) | or Pri | rice (Instr. 3 and | | tion(s) | | | |
| Common Stock 10/0 | | | | 10/01/2 | /2024 | | | М | | 1,483 | | 4 | (1) | 118,843 | | | D | |
| | | т | able II - D (e | | | | | quired, E s, optior | | | | | | wned | | | | |
| Derivative Conversion Date | | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | Number curities cquired) or sposed (D) str. 3, 4 d 5) | Expiration | 6. Date Exercisab Expiration Date (Month/Day/Year) | | Amount of | | ity | Price of erivative ecurity nstr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4) | vative urities leficially ned owing orted nsaction(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Co | ode V | (A) |) (D) | Date Exercisat | | xpiration ate | Title | Amou or Numi of Share | ber | | | | | |
| Restricted Stock Units | (1) | 10/01/2024 | | Ν | M | | 1,483 | (2) | | (2) | Common Stock | ¹ 1,48 | 33 | \$ <mark>0</mark> | 0 | | D | |
| Explanatio | n of Respons | Ses: | | | | | | | | | | | | | | | | |

1. Restricted stock units convert into common stock on a one for one basis.

2. On October 1, 2021, the reporting person was granted 1,483 restricted stock units, vesting on the third anniversary of the grant date.

Remarks:

| /s/ Matthew Horwath, | |
|---------------------------|-------------|
| Attorney-in-Fact for Alex | <u><</u> |
| Davern | |
| ** 0' ' ' D '' D | |

10/03/2024

** 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.