FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* MAYES MICHELE COLEMAN						2. Issuer Name and Ticker or Trading Symbol Gogo Inc. [GOGO] 3. Date of Earliest Transaction (Month/Day/Year)										5. Relationship of Reportin (Check all applicable) Director Officer (give title			on(s) to Issi 10% Ow Other (s	ner
(Last)	ast) (First) (Middle)				06/	06/30/2024										below			below)	·
105 EDGEVIEW DRIVE, STE 300				4. If Amendment, Date of Original Filed (Month/Day/Year)										Line	dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person					
(Street)	FIELD (' O	80021													Form Perso	filed by More n	than	One Repor	ting
,———	TILLD (60021		Rule 10b5-1(c) Transaction Indication															
(City) (State) (Zi			(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan the satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										nat is intende	d to				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar) E	A. Deemed Execution Date, f any Month/Day/Year)		Cod	Transaction I Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				Benefic Owned	es Forn ially (D) o Following (I) (Ir		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									le V		Amount		(A) or (D)	Price	Transac	Reported Fransaction(s) Instr. 3 and 4)			(Instr. 4)	
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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, T	Code (Ins		5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Ex Da	piration ite	Title		Amount or Number of Shares					
Deferred Share Units	(1)	06/30/2024			A		5,197		(2)			(2)	Com Sto		5,197	\$0.00	163,860		D	

Explanation of Responses:

- 1. Each deferred share unit represents the contingent right to receive one share of the Company's common stock
- 2. These deferred share units were granted on June 30, 2024, and will vest in full on the one-year anniversary of the grant date. The deferred share units will be settled in shares of the Company's common stock following the director's termination of service on the Company's board of directors.

/s/ Crystal L. Gordon,

Attorney-in-Fact for Michele 07/02/2024

Coleman Mayes

** 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.