FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

| OMB APPROVAL             |           |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |
| 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).

## 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

| Name and Address of Reporting Person      Pibouin Sophie   |  |                  |             |  | 2. Issuer Name and Ticker or Trading Symbol INTELLINETICS, INC. [ INLX ] |   |         |                                  |  |  |                    |   |   |   | tionship of Reporting Persor<br>all applicable)<br>Director              |  |  | (s) to Issuer | vner       |
|--|--|------------------|-------------|--|--|---|---------|----------------------------------|--|--|--------------------|---|---|---|--|--|--|---------------|------------|
| (Last)   | (First)                                  | (Mi              | ddle)       |  |  | 3. Date of Earliest Transaction (Month/Day/Year) 01/06/2022                 |         |                                  |  |  |                    |   |   |   | Officer (give title below)   |  | Other (s<br>below)                         |               | specify    |
| 4 SAINT JODE COURT   |  |                  |             | 4. If Amendment, Date of Original Filed (Month/Day/Year) |  |   |         |                                  |  |  |                    |   | - 1   | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person |  |  |  |               |            |
| (Street) NORTHPORT   | NY                                       | 11               | 768         |  |  |   |         |                                  |  |  |                    |   |   |   |  | ,  | •  | one Reportin  | g Person   |
| (City)   | (State)                                  | (Zi <sub>l</sub> | p)          |  |  |   |         |                                  |  |  |                    |   |   |   |  |  |  |               |            |
|  |  | Та               | ble I - Nor | ı-Der  | ivativ   | e Se  | curitie | s Acqı                           | uired, C   | isp  | osed of,           | or E  | Benefi  | cially Ov   | /ned   |  |  |               |            |
| Date   |  |                  |             | Fransaction<br>te<br>onth/Day/Year)                      |  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)                 |         | Transaction Dispose Code (Instr. |  | ties Acquired (A) or<br>d Of (D) (Instr. 3, 4 and 5) |                    |   | 5. Amount<br>Securities<br>Beneficiall<br>Following   | y Owned or I  |  | vnership<br>: Direct (D)<br>direct (I)<br>: 4)                     | 7. Nature of Indirect Beneficial Ownership |               |            |
|  |  |                  |             |  |  |   |         |                                  | Code   | v  |                    |   | (A) or<br>(D)   | Price   | Transaction(s) (Instr. 3 and 4)  |  |  |               | (Instr. 4) |
| COMMON STOCK 01/0  |  |                  |             | 1/06/2022  |  |   |         | A                                |  | 1,40   |                    | A   | (1)   | 9,651   |  |  | D  |               |            |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |                  |             |  |  |   |         |                                  |  |  |                    |   |   |   |  |  |  |               |            |
| Title of Derivative Security (Instr. 3)  | tive Conversion Date Execution Date, Tra |                  | Transact    | ransaction Code (Instr. S)                               |  | lumber of ivative urrities urities (Month/Day/) lisposed of (Instr. 3, 4 5) |         | n Dat                            | Securities Und<br>Derivative Sec<br>(Instr. 3 and 4) |  | derlying<br>curity | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4) |   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |               |            |
| ı  |  |                  |             |  | Code   | v   | (A)     | (D)                              | Date<br>Exercisa                                     |  | Expiration<br>Date | Title   |   | Number<br>of Shares   |  |  |  |               |            |

## Explanation of Responses:

1. Granted in exchange for director services to the Company, in accordance with the Company's director compensation policy.

/s/ Sophie Pibouin

01/10/2022

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.