FORM 4

## **UNITED STATES SECU**

Washington, D.C. 20549

KH	IES	AND	EXCH	IANGE	COMM	ISSION

UIVID AP	PROVAL
OMB Number:	3235-0287
Estimated average	je burden

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

## 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

1(c). Se	ee Instruction 1	0.																	
Name and Address of Reporting Person*     GELSINGER PATRICK P					2. Issuer Name <b>and</b> Ticker or Trading Symbol Mobileye Global Inc. [MBLY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
OLLOI	IVOLIV 17	HRICK I							_	_				1	Direc	tor		10% O	wner
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 11/04/2024								Officer (give title Other (sp below) below)					specify	
C/O MO	BILEYE B	.V., HAR HOTZ	VIM																
1 SHLOMO MOMO HALEVI STREET				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)													'	Form filed by One Reporting Person					
JERUSALEM L3 9777015														Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yes				ear) E	Execution Date,		,  i				Acquired (A) or D) (Instr. 3, 4 and 5)		5)	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							-	Code	v	Amount	(A) (D)	or	Price	Transaction(s) (Instr. 3 and 4)		action(s)	(111301. 4)		(111501. 4)
Class A Common Stock 11/04/2024				24	4			P		6,750	A		\$14.940	404(1) 1		39,456		I	By Trust
Class A Common Stock															(	5,400		I	By Family Trust <sup>(2)</sup>
	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)	Derivative Conversion Date Security or Exercise (Month/Day/Year)   Execution Date,				action (Instr.				Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)				tive derivative ty Securities	Owners Form: Direct (I or Indirect) (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Date		Expiration Date		tle	Amount or Number of Shares	er					

## **Explanation of Responses:**

- 1. This transaction was executed in multiple trades at prices ranging from \$14.8600 to \$14.9600. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 2. Reflects updates to the relative holdings of the reporting person's Trusts compared to prior Forms 4. The reporting person's total beneficial ownership has not changed from his most recent Form 4, except to reflect the transactions reported in this Report.

/s/ Liz Cohen-Yerushalmi, 11/06/2024 Attorney-in-Fact

\*\* 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.