FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingtor

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| OMB Number: | 3235-0287 | | | | | |
| Estimated average burde | n | | | | | |
| 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

| 1. Name and Address of Reporting Person* Kalvert Seth J (Last) (First) (Middle) C/O TRIPADVISOR, INC. 400 1ST AVENUE (Street) NEEDHAM MA 02494 | | | | 3. Da 02/2 | 2. Issuer Name and Ticker or Trading Symbol TripAdvisor, Inc. [TRIP] 3. Date of Earliest Transaction (Month/Day/Year) 02/22/2023 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | (Chec | Chief Legal Officer & Sec. 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
|--|--|------------|------------------|--|---|--------------|--------|---|---------------------------|---|---|---|--|--|---|---|--|
| (City) | (State | e) (Z | ip) | | | Person ' | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Tran Date (Month | | | ate | action 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | es Acquired (A) or Of (D) (Instr. 3, 4 and 5 | | Securities F Beneficially (I | | Form: | Direct Indirect tr. 4) | 7. Nature of ndirect Beneficial Ownership 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) | vative Conversion Date Execution Date, Trans urity or Exercise (Month/Day/Year) if any Code | | Transa Code (| ansaction of Clinstr. S. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) S. Number of S. Date Exercisable and Expiration Date (Month/Day/Year) S. Date Exercisable and Expiration Date (Month/Day/Year) S. Date Exercisable and S. Securities (Month/Day/Year) To Disposed of (D) (Instr. 3, 4 and 5) | | | | | es J Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Restricted Stock Units | \$0 | 02/22/2023 | | | Α | | 50,584 | | 02/15/2024 ⁽¹⁾ | 02/15/2028 | Common Stock | 50,584 | \$0 | 50,584 | 4 | D | |
| Restricted Stock Units (Performance- Based) | \$0 | 02/22/2023 | | | A | | 50,584 | | 12/31/2024 ⁽²⁾ | 12/31/2025 | Restricted Stock Units | 50,584 | \$0 | 50,584 | 4 | D | |

Explanation of Responses:

- 1. Date at which first vesting occurs is indicated. 25% of the total number of RSUs vest on February 15, 2024, and 6.25% will vest quarterly thereafter. The award is fully vested on February 15, 2028.
- 2. The number of PSUs to vest and settle will be based on actual performance relative to the performance metrics, targets and weightings to be established by the Compensation Committee for the performance period ended December 31, 2024. The number of derivative securities set forth above is the target number of PSUs. The actual number of PSUs will vest and settle 50% on or about December 31, 2024 and the remaining 50% on December 31, 2025.

/s/ Linda C. Frazier, attorney in

fact

** Signature of Reporting Person

Date

02/24/2023

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.