FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549	
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OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	e conditions o struction 10.	f Rule 10b5-1(c).																	
1. Name and Address of Reporting Person* Koch Monte JM				2. Issuer Name and Ticker or Trading Symbol Gogo Inc. [GOGO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
KOCH WOHLE JW												Director	or		10% Ov	/ner			
(Last) (First) (Middle) 105 EDGEVIEW DRIVE, STE 300					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2024									Officer below)	(give title		Other (s below)	pecify	
					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)														Line) Form filed by One Reporting Person					
BROOM	FIELD C	O	80021										'		iled by One iled by More		Ū	I	
-														Persor			опо поро.	9	
(City)	(8	State)	(Zip)																
		Tab	le I - Non-	Deriva	ative	Sec	uritie	s Ac	quired, D	ispo	osed c	of, or Be	neficial	ly Owned	t				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execution Date,			Code (In:	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)				Benefici	es Fo ially (D) Following (I)		Direct Indirect I	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			, ,			
	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		3A. Deemed Execution Da if any (Month/Day/	ate, T	ransaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owi For Dire or li (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	ode	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares						
Deferred Share Units	(1)	12/31/2024			A		5,871		(2)		(2)	Common Stock	5,871	\$0.00	11,308		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 December 31, 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 Monte JM 01/03/2025

Koch

** 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.