SEC	Form	4
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the

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

	conditions of Rule					
1. Name and Address Moore Scott K	1 0		2. Issuer Name and Ticker or Trading Symbol <u>Hillman Solutions Corp.</u> [HLMN]		ionship of Reporting Pers all applicable) Director	on(s) to Issuer 10% Owner
(Last) (First) (Middle) 1280 KEMPER MEADOW DR.		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/11/2025	x	Officer (give title below) Div. Pres Robo	Other (specify below)
(Street) FOREST PARK	OH (State)	45240 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi X	dual or Joint/Group Filing Form filed by One Rep Form filed by More thar	· · · /
			vative Securities Acquired, Disposed of, or Beneficia	 Ily Owr	ned	

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	 Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	01/11/2025	F		5,205	D	\$9.29	82,358	D	

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 Date, if any (Month/Day/Year)	Code (Ir	Transaction Derivative Code (Instr. Securities		6. Date Exerc Expiration Da (Month/Day/)	ate			Derivative Security (Instr. 5)	Securities Beneficially Owned	 11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)	

Explanation of Responses:

Remarks:



** Signature of Reporting Person

01/14/2025

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.