☐ 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 that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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 *												(Check all ap	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Manko Joseph M. Jr.				SA 1	SAFEGUARD SCIENTIFICS INC [SFE						X_ Director					
(Last) (First) (Middle)				3.]	3. Date of Earliest Transaction (MM/DD/YYYY)							Officer (gi	Officer (give title below) Other (specify below)			
1717 ARCH STREET, 39TH FLOOR					10/16/2023											
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							Y) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)			
PHILADELPHIA, PA 19103 (City) (State) (Zip)													X _ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(0)	19) (5	(24	•	Non-Der	ivati	ive Sec	urities Ac	quii	red, Disj	posed o	f, or H	Seneficially Own	ed			
1. Title of Security (Instr. 3) 2. Trans. De					2A. Deeme Execution Date, if any		(Instr. 8)		4. Securities Acquired Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Secur Following Reported (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	V	Amount	(A) or (D)	Price	:			(I) (Instr. 4)	(msu. 1)
Common Stock, \$0.10 par value 10/16/202			/16/2023			A		26,266). A	\$1.11	1)		194,236	D		
Common Stock, \$0.10 par value														177,386	I	Horton Capital Partners Fund, LP (2)
	Tabl	le II - Der	ivative So	ecurities	Bene	eficially	y Owned ((e.g.	, puts, c	alls, wa	rrant	s, options, conve	rtible secu	urities)		
			(Instr. 8)		Derivat Acquire Dispose			and Expiration Date			and Amount of ies Underlying tive Security 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form of	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)		ercisable I	Expiration Date		Amount or Number of Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	

Explanation of Responses:

- (1) The securities reported herein were awarded to the Reporting Person in lieu of quarterly fees for service on the Issuer's Board of Directors, which fees are paid in arrears following the end of the quarter.
- (2) Securities owned directly by Horton Capital Partners Fund, LP ("HCPF"). The Reporting Person, solely by virtue of his position as the managing member of Horton Capital Management, LLC ("HCM"), which serves as the investment manager of HCPF, and as the managing member of Horton Capital Partners, LLC, which serves as the general partner of HCPF, may be deemed to beneficially own the securities directly held by HCPF for purposes of Section 16. The Reporting Person expressly disclaims beneficial ownership of such securities except to the extent of his pecuniary interest therein.

Reporting Owners

Panerting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Manko Joseph M. Jr. 1717 ARCH STREET 39TH FLOOR PHILADELPHIA, PA 19103	X						

Signatures

/s/ Joseph M. Manko Jr. 10/18/2023 **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 control number.