FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|------------------|------------|---------------|------------------|

| OMB APPROVAL | | | | | | | | | |
|----------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average by | urden | | | | | | | | |
| 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 purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

| | Struction 10. | | | | | | | | | | | | | | | | | | | |
|--|--|--|---|-------|---|---|-----|-------|--|-----------------|-----------|---|--|------------------|---|--|--------------------------------------|--|--|-----|
| 1. Name and Address of Reporting Person* | | | | | | 2. Issuer Name and Ticker or Trading Symbol Comstock Holding Companies, Inc. [CHCI] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | | | | | | | |
| <u>GUERNSEY DAVID M</u> | | | | | - | Companies, me. [cher] | | | | | | | | ' [| Direct | or | | 10% Ov | wner | |
| (Last) | , | , | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 01/03/2025 | | | | | | | | | | Officer (give title Other (specify below) below) | | | | | |
| 1900 RESTON METRO PLAZA | | | | | | | | | | | | | | | | | | | | |
| 10TH FLOOR | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) | | | | | | | | | | | | | | | Line | <u></u> | filed by One | a Ren | orting Perso | .n |
| RESTON | N VA | A : | 20190 | | | | | | | | | | | | ' | | filed by Mo | | n One Repo | - 1 |
| (City) | (St | tate) | (Zip) | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date, | | | , | Code (Instr. 5) | | | | | Benefic Owned | es ially Following | Form (D) o | n: Direct or Indirect ostr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | t (A) or (D) | | Price | Transac | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | |
| Class A Common Stock, \$0.01 par value 01/03/. | | | | | 3/2025 | 2025 | | | M | | 3,571 A S | | \$7.1 | 5 56 | 56,527 | | 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. Deemd Execution if any (Month/Da | Date, | 4. Transactior Code (Instr 8) | | | | 6. Date Exercisa Expiration Date (Month/Day/Year | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4) | s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | | | | | | Ar | mount | | | | | |
| | | | | | Code | v | (A) | (D) | Date Exe | te ercisable | | xpiration ate | Title | Nu of | umber | | | | | |
| Warrant to purchase Class A Common Stock, \$0.01 par value | \$7.16 | 01/03/2025 | | | M | | | 3,571 | 07/ | /14/2015 | 5 0 | 1/14/2025 | Class A Commo Stock \$0.01 p value | on 3 | ,571 | \$7.16 | 0.00 | | D | |

Explanation of Responses:

Remarks:

/s/ David M. Guernsey

01/07/2025

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).