| SEC Form | 4 |
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Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

OMB APPROVAL

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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235-0287 |
| | Estimated average bur | den |
| | hours per response: | 0.5 |

Γ

| 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* Hughes Brian | | | | 2. Issuer Name and Ticker or Trading Symbol Affirm Holdings, Inc. [AFRM] | | | | | | | ationship of Reporting Person(s) to Issuer (all applicable) | | | |
|--|----------|-------------|-----------------|--|---|-------|------------------------------------|------------|---------------|---|---|---|------------|--|
| (Last) | (First) | (Middle) | | 3. Da | te of Earliest Transa 1/2024 | | - | | _ | Director Officer (give title below) | | Owner (specify) | | |
| C/O AFFIRM HOLDINGS, INC. 650 CALIFORNIA STREET (Street) | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable ine) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| SAN FRANCISCO | CA | 94108 | | Rul | e 10b5-1(c) | Tran | sac | tion Indic | | | | | | |
| (City) | (State) | (Zip) | | 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. | | | | | | | | | | |
| | Ta | able I - No | n-Deriva | tive S | ecurities Acq | uired | Dis | posed of, | or Ber | neficially | y Owned | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | Execution Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities Disposed Of 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | |
| Class A Commo | on Stock | | 07/01/2 | 024 | | A | | 16,761(1) | A | \$0 ⁽²⁾ | 16,761 | D | | |
| | | Table II - | | | curities Acqui IIs, warrants, | | | | | | Owned | | | |

| | | | | | | | | - | | | | - | | | |
|---|---|--|---|------------------------------|---|-----|-----|--|---|-------|---|--|--|--|--|
| 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) | 4. Transa Code (8) | | of | | 6. Date Exerc Expiration Da (Month/Day/Y | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 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 | | | | |

Explanation of Responses:

1. Grant of Restricted Stock Units (RSUs) under the Issuer's Amended and Restated 2012 Stock Plan. The RSUs vest in three annual installments beginning July 1, 2025.

2. Each RSU represents a contingent right to receive one share of the Issuer's Class A Common Stock.

Remarks:

/s/ Josh Samples, Attorney-in-07/02/2024

Fact

** 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.