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 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)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person* <u>Jiyane Siphelele</u>						2. Issuer Name and Ticker or Trading Symbol Affirm Holdings, Inc. [AFRM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	,	rst) DINGS, INC.			3. Date of Earliest Transaction (Month/Day/Year) 07/01/2024							S	below)	Officer (give title below) Chief Accou		Other (s below) g Officer	pecify		
650 CALIFORNIA STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN FRANCI	,		94108										S		led by Mor		orting Persor	I	
(City) (State)			(Zip)			Rule 10b5-1(c) Transaction Indication 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.													
		Tab	le I - No	n-Deri	vativ	e Se	curities	Ac	quired, D	isp	osed o	f, or Be	neficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)						ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos		Disposed	rities Acquired (A) or ed Of (D) (Instr. 3, 4 an		5. Amour Securitie Beneficia Owned F Reported	s ally ollowing	Form (D) o	Form: Direct of D) or Indirect EI) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	<i>'</i>	Amount	(A) or (D)	Price	Transact (Instr. 3 a	tion(s)			(Instr. 4)	
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)		4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year		of Securit		ies g Security		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		xpiration ate	Title	Amount or Number of Shares						
Restricted Stock Units	(1)	07/01/2024			A		7,500		(2)		(2)	Class A Common Stock	7,500	\$0	7,500)	D		
Restricted Stock Units	(1)	07/01/2024			A		30,000		(3)		(3)	Class A Common Stock	30,000	\$0	30,00	0	D		

Explanation of Responses:

- 1. Each Restricted Stock Unit (RSU) represents a contingent right to receive one share of the Issuer's Class A Common Stock.
- 2. RSUs vest with respect to the shares of Class A Common Stock underlying the restricted stock units in equal quarterly installments for a period of one year beginning September 1, 2024, the vesting commencement date, subject to the Reporting Person's continued employment with the Issuer as of each vesting date.
- 3. RSUs vest with respect to the shares of Class A Common Stock underlying the restricted stock units in equal quarterly installments for a period of three years beginning September 1, 2024, the vesting commencement date, subject to the Reporting Person's continued employment with the Issuer as of each vesting date.

Remarks:

/s/ Josh Samples, Attorney-in-**Fact**

07/02/2024

** 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.