FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| UMB 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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person*  Martincevic Silvija  (Last) (First) (Middle)  C/O AFFIRM HOLDINGS, INC.  650 CALIFORNIA STREET |     |            |            |                       | 3. E   | 2. Issuer Name and Ticker or Trading Symbol Affirm Holdings, Inc. [ AFRM ]  3. Date of Earliest Transaction (Month/Day/Year) 08/01/2021 |                                      |        |  |        |                             |   |   | Relationship of Reporting Person(s) to Issuer heck all applicable)  Director 10% Owner  X Officer (give title other (specify below) below)  Chief Commercial Officer |  |  |             | vner |  |
|--|-----|------------|------------|-----------------------|--|---|--------------------------------------|--------|--|--------|-----------------------------|---|---|--|--|--|-------------|------|--|
| (Street) SAN FRANCISCO CA 94108  (City) (State) (Zip)  |     |            |            |                       | 4. 1   | 4. If Amendment, Date of Original Filed (Month/Day/Year)  |                                      |        |  |        |                             |   |   | 6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person                       |  |  |             |      |  |
|  |     | Tab        | le I - Noi | n-Deriv               | /ative                                       | Sec   | curiti                               | ies Ac | quired,  | Dis    | posed o                     | of, or Be   | neficia                                   | lly Owne   | d  |  |             |      |  |
| 1. Title of Security (Instr. 3)  2. Trans Date (Month/I  |     |            |            |                       | Execution Date,                              |   | Transaction Disposed Code (Instr. 5) |        | ities Acquired (A) or<br>d Of (D) (Instr. 3, 4 and |        | Securit<br>Benefic<br>Owned | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported |   | n: Direct<br>r Indirect<br>istr. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)        |  |             |      |  |
|  |     |            |            |                       |  |   |                                      | Code   | v  | Amount | (A) o<br>(D)                | Price   | Transac<br>(Instr. 3                      | ction(s)   |  |  | (111301. 4) |      |  |
| Class A Common Stock 08/03   |     |            |            |                       | L/2021                                       | 2021  |                                      | M      |  | 3,333  |                             | (1)   | 14  | 1,363  |  | D  |             |      |  |
| Class A Common Stock 08/01/2   |     |            |            |                       | L/2021                                       | /2021   |                                      | F      |  | 1,653  | (2) <b>D</b>                | \$56.   | 32 12,710                                 |  |  | D  |             |      |  |
|  |     |            | (e.g., p   | outs,<br>4.<br>Transa | ransaction of E<br>code (Instr. Derivative ( |   |                                      |        |  |        |                             | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                       | 8. Price of Derivative Security Securitie |  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |             |      |  |
|  |     |            |            |                       | Code   | v   | (A)                                  |        | Date<br>Exercisab                                  |        | xpiration<br>ate            | Title   | Number<br>of<br>Shares                    |  |  |  |             |      |  |
| Restricted<br>Stock<br>Units   | (1) | 08/01/2021 |            |                       | M  |   |                                      | 3,333  | (3)  | 1      | 2/31/2027                   | Class A<br>Common<br>Stock  | 3,333                                     | \$0  | 56,667   | 7  | D           |      |  |

## **Explanation of Responses:**

- 1. Each restricted stock unit represents a contingent right to receive one share of the Issuer's Class A Common Stock.
- 2. Represents the number of shares of the Issuer's Common Stock withheld to satisfy the Reporting Person's tax obligation in connection with the settlement of shares of Class A Common Stock underlying the Reporting Person's restricted stock units that vested on August 1, 2021.
- 3. Restricted stock units vest with respect to the shares of Class A Common Stock underlying the restricted stock units in monthly installments for a period of twenty-four months beginning on January 1, 2021, the vesting commencement date, subject to the Reporting Person's continued employment with the Issuer as of each vesting date.

## Remarks:

/s/ David Ritenour, Attorney-

08/03/2021

in-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.