## FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OKITIES	AND EXCHANGE	COMMISSIC
144 1	D 0 00540	

OMB APPROVAL				
OMB Number:	3235-0287			
Estimated average burden				

0.5

hours per response:

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

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

defense condition See Instruction	ns of Rule 10b5-1(c). 10.						
1. Name and Address of Reporting Person* <u>Linford Michael</u>		n*	2. Issuer Name <b>and</b> Ticker or Trading Symbol Affirm Holdings, Inc. [ AFRM ]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify		
(Last) C/O AFFIRM E 650 CALIFORN	(First) HOLDINGS, INC. NIA STREET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/01/2024		below) Chief Operating Officer & CFO		
(Street) SAN FRANCISCO	CA (State)	94108	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Group Filir Form filed by One Rep Form filed by More that Person	porting Person	

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 1. Title of Security (Instr. 3) 2. Transaction Date 2A. Deemed 5. Amount of 6. Ownership 7. Nature Execution Date Transaction Form: Direct of Indirect Beneficial Code (Instr. 8) Beneficially Owned Following (D) or Indirect (Month/Day/Year) 5) (Month/Day/Year) (I) (Instr. 4) Ownership Reported (Instr. 4) (A) or (D) ٧ Price Code Amount (Instr. 3 and 4) Class A Common Stock 09/01/2024 2,335 126,584 M A \$0 D 1,020(1) Class A Common Stock 09/01/2024 F D \$44.01 125,564 D

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 5. Number of 3. Transaction Date 1. Title of Derivative 3A. Deemed Execution Date 6. Date Exercisable and Expiration Date 7. Title and Amount of 8. Price of Derivative 9. Number of derivative 11. Nature of Indirect 10. Ownership Transaction Code (Instr. (Month/Day/Year) Derivative (Month/Day/Year) Securities Security or Exercise Security Securities Form: Beneficial Price of Derivative Underlying Derivative Security (Instr. 3) (Month/Day/Year) 8) Securities (Instr. 5) Beneficially Direct (D) Ownership Following (A) or (I) (Instr. 4) Security (Instr. 3 and 4) Disposed of (D) (Instr. 3, 4 Reported Transaction(s) (Instr. 4) and 5) Amount Number Expiration Code (A) (D) Exercisable Date Title Shares Restricted Class A 09/01/2024 2 335 (3) (3) 2.335 \$0 56.055 D Units Stock

## **Explanation of Responses:**

- 1. 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 Common Stock underlying the Reporting Person's restricted stock units that vested on September 1, 2024.
- 2. Each Restricted Stock Unit (RSU) represents a contingent right to receive one share of the Issuer's Class A Common Stock.
- 3. The RSUs vest in 48 equal monthly installments beginning October 1, 2022, subject to the Reporting Person's continuous service with the Issuer as of each vesting date. This grant has no expiration date.

## Remarks:

/s/ Josh Samples, Attorney-in-

09/04/2024

**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.