FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington.	D.C.	20549

	OMB APPROVAL								
l	OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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Name and Address of Reporting Person* Watzinger Gerhard					2. Issuer Name and Ticker or Trading Symbol CrowdStrike Holdings, Inc. [CRWD]						(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	`	First) KE HOLDINGS		3. Date of Earliest Transaction (Month/Day/Year) 12/10/2020							Officer (give title Other (specify below) below)						
150 MATHILDA PLACE, SUITE 300																	
(Street)	VALE C	ČA .	94086		4. If Amendment, Date of Original Filed (Month/Day/Year)					'ear)	6. Ind	dividual or Joint/Group Filing (Check Applicable Line Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5	State)	(Zip)														
		7	able I - Non-	Deriva	tive S	Securiti	es Acq	uired,	Dis	osed of,	or Ben	eficially	Owned				
Date				action 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of (D) (Instr. 3, 4)			and 5) Securities Beneficial Owned Fo		Form:	Direct Indirect Etr. 4)	. Nature of ndirect Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)		
			Table II - D							sed of, o			wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) ce of vivative	3A. Deemed Execution Date, if any (Month/Day/Year	Code	ansaction Deriv ode (Instr. Secu Acqu Disp		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		ate of Securities		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s (Instr. 4)		s)	
Class B common stock	\$0	12/10/2020		G ⁽¹⁾	v		100,000	(2))	(2)	Class A common stock	100,000	\$0	0(3)		I	By Clavius AP, LLC ⁽⁴⁾
Class B common stock	\$0	12/10/2020		G ⁽¹⁾	v	100,000		(2))	(2)	Class A common stock	100,000	\$0	100,00	00	I	By Clavius AP, LLC ⁽⁴⁾
Class B common stock	\$0							(2))	(2)	Class A common stock	395,000		395,000	000 ⁽³⁾ I		By Clavius Capital LLC ⁽⁴⁾
Class B common stock	\$0							(2))	(2)	Class A common stock	30,000		30,00	00	D	

Explanation of Responses:

- 1. Reflects an exempt gift of all of the Reporting Person's membership interests in Clavius AP, LLC to The Watzinger Family Trust.
- 2. Each share of Class B common stock is convertible at any time at the option of the Reporting Person into one share of Class A common stock and has no expiration date. All shares of Class B common stock will automatically convert into shares of Class A common stock upon the occurrence of certain specified events.
- 3. Reflects the transfer of 100,000 shares from Clavius Capital LLC to Clavius AP, LLC that is exempt from Section 16 pursuant to Rule 16a-13.
- 4. The Reporting Person disclaims beneficial ownership of the shares except to the extent of his pecuniary interest in such shares.

/s/ Remie Solano, as Attorneyin-Fact for Gerhard Watzinger

** Signature of Reporting Person

12/17/2020

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.