SEC Form 4
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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).	
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## 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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1. Name and Address of Reporting Person* Podbere Burt W.			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>CrowdStrike Holdings, Inc.</u> [ CRWD ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify
<ul> <li>(Last) (First) (Middle)</li> <li>C/O CROWDSTRIKE HOLDINGS, INC.</li> <li>206 E. 9TH STREET, SUITE 1400</li> </ul>		DINGS, INC.	3. Date of Earliest Transaction (Month/Day/Year) 03/16/2022	Chief Financial Officer
(Street) AUSTIN (City)	TX (State)	78701 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (	Transaction Disposed Of (D) (Instr. 3, 4 and Code (Instr. 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 (Instr. 4)			
			Code V		Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(11311. 4)	(1130. 4)	
Class A common stock	03/16/2022		A		32,008(1)	Α	\$ <mark>0</mark>	293,887 <sup>(2)</sup>	D		
Class A common stock								42,800	Ι	Buttonwillow Trust <sup>(3)</sup>	
Class A common stock								42,800	Ι	Doris Trust <sup>(3)</sup>	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(e.g., pr	113, 00	uno, v	vane	unts,	options, t	,onvertib	10 30	cunties	)				i.
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)	Code (	ansaction ode (Instr. bde (Instr. bde (Instr. bde (Instr. bde (Instr. bde (Instr. bde (Instr. bde (Instr. bisposed of (D) (Instr. 3, 4 and 5) bisposed		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 5) Security (Instr. 3 and 4)			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. The shares represent unvested restricted stock units ("RSUs") with 25% of the RSUs vesting on March 20, 2022 and the remaining RSUs vesting in 12 equal quarterly installments thereafter. The final award amount for these RSUs was determined based on performance factors achieved for the issuer's fiscal year ending January 31, 2022.

2. Includes shares to be issued in connection with the vesting of one or more RSUs.

3. The reporting person disclaims beneficial ownership except to the extent of his pecuniary interest therein.

<u>/s/ Remie Solano, as Attorney-</u> <u>in-Fact for Burt W. Podbere</u> <u>03/18/2022</u>

\*\* 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.