FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 | |
|-------------|------------|--|

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|------------------|-------------------|---------------|------------------|

| OMB APP | PROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| 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

| Name and Address of Reporting Person* DAVIS CARY | | | | | 2. Issuer Name and Ticker or Trading Symbol CrowdStrike Holdings, Inc. [CRWD] | | | | | | (Che | elationship eck all appl Direct | licable) | ng Per | rson(s) to Is | | | | |
|---|--|--|---|---------|---|---|--------|-------------------------------------|------------------|--------|--|---|---|--|---|---|--------------------|--|--|
| (Last) | (Fir | st) (N | /liddle) | , | | 3. Date of Earliest Transaction (Month/Day/Year) 12/06/2023 | | | | | | | | Office below | er (give title | | Other (s below) | specify | |
| C/O CROWDSTRIKE HOLDINGS, INC. 206 E. 9TH ST., STE. 1400 | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| (Street) AUSTIN | TX | 7 | 8701 | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | |
| (City) | (Sta | ate) (Z | 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. | | | | | | | | | | | | | | |
| | | Table | I - Non | -Deriva | tive S | Secu | rities | Acq | uired, | Dis | oosed of | , or E | 3ene | ficial | ly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | Execution Da | | Date, | Code (Instr. | | | | | Securit Benefic Owned | | | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | Code V Amount | | | | | Amount | (A) (D) | or P | Price | Reporte Transac (Instr. 3 | ction(s) | | | (Instr. 4) | |
| Class A c | ommon sto | ck | | 12/07/ | 2023 | | G | | 6,200 | I |) | \$ <mark>0</mark> | 22,370(1)(2) | | | D | | | |
| | 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. Deer Execution if any (Month/I | | | Transaction of Code (Instr. Derivative | | Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | str. | s. Price of Derivative Security Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4) | Owners Form: Direct (or Indir (I) (Insti | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amou or Numb of Share | ber | | | | | |

Explanation of Responses:

- 1. Includes shares to be issued in connection with the vesting of one or more RSUs.
- 2. Following the transaction reported in this Form 4, Mr. Davis holds 9,489 shares, while his affiliated trusts, the 2011 Davis Family Trust and the 2014 John McGinn GST Trust, hold 9,199 Shares and 1,945 Shares, respectively.

/s/ Remie Solano, Attorney-in-Fact 12/08/2023

** 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.