FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | .C. 20549 |
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| eck this box if no longer subject |
|-----------------------------------|
| Section 16. Form 4 or Form 5 |
| igations may continue. See |
| 4 |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | | |
|---|--------------------------|-----|--|--|--|--|--|--|--|--|
| | OMB Number: 3235-0287 | | | | | | | | | |
| l | Estimated average burden | | | | | | | | | |
| ı | hours per response: | 0.5 | | | | | | | | |

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* Henry Shawn | | | | 2. Issuer Name and Ticker or Trading Symbol CrowdStrike Holdings, Inc. [CRWD] | | | | | | | | ck all app Direc | tor | | 10% Ov | vner | | | |
|---|--|---------|---------|---|---|--|---|-----|---------------------|--|--------------------|------------------------------------|---|--|--|--|---|----|---|
| (Last) | (Fir | , | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 12/13/2023 | | | | | | | | X | belov | er (give title v) EF SECUI | | Other (s below) | ` | |
| C/O CROWDSTRIKE HOLDINGS, INC. 206 E. 9TH ST., STE. 1400 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Inc | . Individual or Joint/Group Filing (Check Applicable ine) | | | | | | |
| (Ctroot) | | | | | | | | | | | | | X | X Form filed by One Reporting Person | | | | on | |
| (Street) AUSTIN | TX | 7 | 8701 | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | |
| (City) | (Sta | ate) (Z | Zip) | | Rul | 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-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | ay/Year) Exe | | A. Deemed recution Date, any lonth/Day/Year) | | | | | es Acquired (A Of (D) (Instr. 3 | | s, 4 and Secu Bene Own | | cially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A) (D) | or F | Price | Report Transa (Instr. 3 | ed ction(s) 3 and 4) | | | (Instr. 4) |
| Class A common stock 12/13/ | | | | 3/2023 | | | | G | | 6,250 | Г |) | \$ <mark>0</mark> | 199,982(1) | | | 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) | vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any | | | Transaction of Code (Instr. 8) Si Ai (A | | osed) r. 3, 4 | Expiration Da | | te | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | Di Se (II | Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code V | | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amou or Numb of Share | | | | | | |

Explanation of Responses:

1. Includes shares to be issued in connection with the vesting of one or more restricted stock units ("RSUs") and performance stock units.

/s/ Remie Solano, Attorney-in-12/14/2023 **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.