FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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

1. Name and Address of Reporting Person*  Datta Sanjay.  (Last) (First) (Middle)  C/O UPSTART HOLDINGS, INC.						2. Issuer Name and Ticker or Trading Symbol Upstart Holdings, Inc. [ UPST ]										eck all appli Directo	tionship of Reportir all applicable) Director		10% O	Owner	
						3. Date of Earliest Transaction (Month/Day/Year) 05/01/2023										helow)	r (give title ) Chief Fina	ncial	Other (solution) Officer	specify	
2950 S. DELAWARE STREET, SUITE 300					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	6. Individual or Joint/Group Filing (Check Applicabl Line)					
(Street) SAN MA	eet) AN MATEO CA 94403														X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)					Ri	Rule 10b5-1(c) Transaction Indication															
					X	X 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.															
		Tab	le I - No	n-Deriv	ative	e Se	curit	ies Ad	quire	ed, D	isp	osed o	of, or	Ber	neficial	ly Owne	d				
Da			Date	Transaction ate Ionth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Inst				ities Acquired (A) or d Of (D) (Instr. 3, 4 a			Benefic	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Со	de V		Amount	(A) or (D)		Price	Transac (Instr. 3	tion(s)			(mau. 4)	
Common	Stock			05/01	/2023			M	(1)		3,200		A	\$1.3	466,468 <sup>(2)</sup>			D			
Common	Stock	ck 05/01			/2023	/2023			S(	1)		3,200	)	D	\$13.8	34 463	3,268		D		
		T	able II -									sed of, onverti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemd Execution if any (Month/Da	Date, Trans Code			of		Expira	6. Date Exercisabl Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable		cpiration ate	Title		Amount or Number of Shares	ber					
Employee Stock Option	\$1.35	05/01/2023			M <sup>(1)</sup>			3,200	(3	<del>)</del>	12	2/28/2026	Comm		3,200	\$0	21,939	9	D		

## **Explanation of Responses:**

- 1. The option exercise and sale reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on August 30, 2022.
- 2. Certain of these securities are restricted stock units (RSUs). Each RSU represents a contingent right to receive one share of Common Stock, subject to the applicable vesting schedule and conditions of each
- 3. All of the shares subject to this option are fully vested and exercisable as of the date hereof.

## Remarks:

buy)

/s/ Christopher Ing, by power of attorney

05/03/2023

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.