FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number: 3235-028											
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*     Datta Sanjay				2. Issuer Name <b>and</b> Ticker or Trading Symbol Upstart Holdings, Inc. [ UPST ]								(Chec	k all app Direc	licable) tor	ng Person(s) to				
(Last)	`	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 07/01/2024							<b>V</b>	Officer (give title below)  Chief Finan		below)		Бреспу		
C/O UPSTART HOLDINGS, INC. 2950 S. DELAWARE STREET, SUITE 410					4. If Amendment, Date of Original Filed (Month/Day/Year)							'	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SAN MA	reet) AN MATEO CA 94403												<b>V</b>	Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City) (State) (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-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Exec ay/Year) if any		Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8)  4. Securities Acquired (Disposed Of (D) (Instr. 3)  5)					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 07/01/2						2024					1,000	D	\$2	3.63	376	376,398(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)	rative   Conversion   Date rity   or Exercise   (Month/Day/Year)   if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable an Expiration Date (Month/Day/Year)		ite	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	g d tion(s)	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	Amount or Number of Shares		er						

## **Explanation of Responses:**

- 1. The sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on February 26, 2024.
- 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 RSU

## Remarks:

/s/ Gabrielle Brown, by power 07/03/2024 of attorney

\*\* 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.