FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasiiiigtoii, D.C. 20	049	

	OMB APPROVAL													
	OMB Number:		3235-0287											
- 1	l =													

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287
	Estimated average but	
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	0.5
or Section 30(h) of the Investment Company Act of 1940		

1(0). 36	ee Instruction	10.																	
Name and Address of Reporting Person* Liu Ving					2. Issuer Name and Ticker or Trading Symbol Expensify, Inc. [EXFY]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Liu Ying</u>												I—,	V	Direc	tor		10% O	wner	
	C/O EXPENSIFY, INC.					3. Date of Earliest Transaction (Month/Day/Year) 10/05/2024									Officer (give title Other (speci below) below)				
401 SW	5TH AVE				4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														V	Form	filed by On	e Repo	orting Pers	on
PORTLAND OR 97204													Form filed by More than One Reporting Person						
(City)	(5	tate) (Zip)																
		Table	l - No	n-Deriva	tive \$	Secu	ritie	s Acq	uired,	Dis	oosed of	, or l	Bene	eficiall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				5. Amo Securit Benefic Owned Report	ties Fo cially (D) d Following (I)		vnership i: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				(111511. 4)	
Class A Common Stock 10/05/2					2024		A		2,252(1)	252 ⁽¹⁾ A		\$ <mark>0</mark>	\$0 111,918		D				
		Та									osed of, o				Owne	d			
1. Title of Derivative Security (Instr. 3) Price of Derivative Security		se (Month/Day/Year) if any (Month		omed 4. Transa Code (I VDay/Year) 8)					6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)	
						v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amo or Num of Shar	.					

Explanation of Responses:

1. Reflects an award of restricted stock units ("RSUs") pursuant to the Non-Employee Director Compensation Program, which vested immediately on the grant date. Each RSU represented a right to receive one share of Class A common stock.

Remarks:

/s/ Ryan Schaffer, as attorneyin-fact

10/09/2024

** 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.