FORM 4

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

Vashington,	D.C	20549	
vasilington,	D.C.	20343	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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*     Schaffer Ryan				2. Issuer Name <b>and</b> Ticker or Trading Symbol <b>Expensify, Inc.</b> [ EXFY ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
SCHarre	<u>ri Kyan</u>				1-		- 0.0		-	-					X Directo	or		10% Ov	vner
(Last)	(F	-irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/21/2023							7 :	X Officer below)	(give title		Other (s	specify	
C/O EXI	PENSIFY,	INC			100/2	.1/20	123								C	hief Fina	ncial	Officer	
l	5TH AVE	1110.			-														
401 SW	51 H AV E				. 4. If A	Amer	ndmer	nt, Date	of Origin	al File	d (Month/I	Day/Yea	r)	6. Ir Line	ndividual or e)	Joint/Group	p Filin	g (Check A <sub>l</sub>	oplicable
(Street)															X Form f	filed by One	e Repo	orting Perso	on
PORTLA	AND C	)R	97204												Form f Perso		re thar	n One Repo	orting
(City)	?)	State)	(Zip)		Rul	le 1	LOb!	5-1(c	) Tran	sac	tion In	dicat	ion						
											saction was				ntract, instruction 10.	ction or writte	en plan	that is inten	ded to
		Tabl	e I - No	n-Deriv	ative \$	Sec	uriti	ies Ac	quired	, Dis	posed	of, or	Ben	eficial	ly Owne	d			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,		Code	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)				Benefic Owned	es   F ially (	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(4	() or	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Class A Common Stock 06/21/2					2023				M <sup>(1)</sup>	T	7,75	0	A	\$0.97	7 86	,492		D	
Class A Common Stock 06/21/			2023	2023 S <sup>(1)</sup> 7,750 D \$		\$8.04	78,742			D									
		Ta	able II -												Owned				
				(e.g., p	uts, c	alis	, wa	rrants	s, optic	ns, c	convert	ibie s	ecur	ities)					
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/E	on Date,		ansaction ode (Instr.		n of		xercis n Date ay/Ye		7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	N O	Amount or Jumber of Shares					
Stock Option	\$0.97	06/21/2023			M <sup>(1)</sup>			7,750	(3)	(	14/11/2029	Class Comm		7,750	\$0	348,03	3	D	

## **Explanation of Responses:**

- $1.\ The\ transactions\ reported\ on\ this\ Form\ 4\ were\ effected\ pursuant\ to\ a\ Rule\ 10b5-1\ trading\ plan\ adopted\ by\ the\ reporting\ person\ on\ March\ 16,\ 2023.$
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$8.00 to \$8.15, inclusive. The reporting person undertakes to provide to Expensify, Inc., any security holder of Expensify, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4.
- 3. Reflects remaining portion of the stock option that originally vested in 72 equal monthly installments beginning on May 12, 2019.

## Remarks:

/s/ Ryan Schaffer

06/23/2023

\*\* Signature of Reporting Person

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.