FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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hours per response:

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Kennedy Kelly J. | | | | | | Susuer Name and Ticker or Trading Symbol GoodRx Holdings, Inc. [GDRX] Date of Earliest Transaction (Month/Day/Year) 07/08/2024 | | | | | | | | (Ct | eck all app | tor er (give title | ng Pers | son(s) to Is: 10% Ow Other (s | ner |
|--|--|--|---------|------------------------------|--|---|--------|--------|----------|--------------------------------------|--|----------------------------|---|---|---|--|--|--|--|
| (Last) (First) (Middle) C/O GOODRX HOLDINGS, INC. 2701 OLYMPIC BOULEVARD | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Lin | 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person | | | | | | |
| (Street) SANTA MONICA | A CA | A 9 | 0404 | | | Form filed by More than One Reporting Person Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | |
| (City) | (Sta | | Zip) | | 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 - Nor | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or I | Bene | eficia | Illy Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execu ay/Year) if any | | Deemed ecution Date, ny onth/Day/Year) | | | | es Acquired (A) Of (D) (Instr. 3, | | | Benefic | ties For cially (D) I Following (I) | | Direct of Indirect Istr. 4) | 7. Nature of Indirect Beneficial Ownership Instr. 4) | | |
| | | | | | | | Code | v | Amount | (A) or (D) Pri | | Price | Transaction(s) (Instr. 3 and 4) | | | | | | |
| Class A Common Stock 07/08/2 | | | | | 2024 | | A | | 2,464(1) | 1 ⁽¹⁾ A | | \$ <mark>0</mark> | 30,862 | | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | med on Date, Day/Year) | Code (Instr. | | | of Exp | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | nstr. | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y C | O. Dwnership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code V | | (A) | (D) | | | Expiration Date | Amount or Number of Shares | | ber | | | | | |

Explanation of Responses:

1. Reflects restricted stock units. Each restricted stock unit represents a contingent right to receive one share of Class A common stock. The restricted stock units vest in full on the earlier of (i) June 6, 2025 and (ii) the date of the 2025 Annual Meeting of Stockholders, subject to continued service through the applicable vesting date.

Remarks:

/s/ Gracye Cheng, Attorneyin-Fact for Kelly J. Kennedy

07/10/2024

** 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.