## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20540
wasiiiigtoii,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average b	urden								
- 1	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

1. Name and Address of Reporting Person*  Beri Raj					2. Issuer Name <b>and</b> Ticker or Trading Symbol GoodRx Holdings, Inc. [ GDRX ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director					
(Last)	•	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/30/2023							2	X Officer (give title below) Other (specibelow)  CHIEF OPERATING OFFICER				
2701 OLYMPIC BOULEVARD				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SANTA MONICA	A C.	A	90404												led by One Repled by More that	-		
(City)	(S	tate)	(Zip)		_  Ru	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. Transac Date (Month/Date)					Execution Date,		r, Transaction Dispose Code (Instr. 5)		urities Acquired (A) o ed Of (D) (Instr. 3, 4		5. Amou Securitie Beneficia Owned F Reported	es For ally (D) Following (I) (	m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code			V A	Amount	mount (A) or (D)		Transact (Instr. 3	ion(s)		(1130.4)				
	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)	3A. Deemed Execution Da if any (Month/Day/Y	ite,		ransaction Derivative Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			es g Security	8. Price of Derivative Security (Instr. 5)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable	Expir Date	ration	Title	Amount or Number of Shares		(Instr. 4)			
Restricted Stock Units	(1)	05/30/2023			A		506,508		(2)	(2	(2)	Class A Common Stock	506,508	\$0	506,508	D		
Stock option (Right to Buy)	\$5.53	05/30/2023			A		692,252		(3)	05/30	0/2033	Class A Common Stock	692,252	\$0	692,252	D		

## Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of Class A common stock.
- 2. The restricted stock units vest as to 6.25% of the underlying shares on August 8,2023 and the remaining 93.75% of the underlying shares vest in approximately equal quarterly installments thereafter for 15 quarters.
- 3. The option will vest and become exercisable as to 6.25% of the underlying shares on August 8, 2023 and the remaining 93.75% underlying shares vest in approximately equal quarterly installments thereafter for 15 quarters.

<u>/s/ Gracye Cheng, Attorney-in-</u> <u>Fact for Raj Beri</u>

06/01/2023

\*\* 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.