FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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).

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 10b5-1(c). See Instruction 10.

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* Butterfield Peter					2. Issuer Name and Ticker or Trading Symbol Flywire Corp [FLYW]												10% O	vner	
(Last) (First) (Middle) C/O FLYWIRE CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 12/10/2024								J	below	,	Other (s below) unsel and CCO		specify	
141 TREMONT STREET, SUITE 10				-	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) BOSTON MA 02111		2111		4. Il Allendinent, Date di Original Filed (Montinibay) fear)							Line)	Form Form	Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Ž	Zip)																
		Table	I - Non-Dei	ivati	ive S	Secui	rities	Acc	quire	ed, D	isposed c	f, or I	Benefi	icially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea				2A. Deemed Execution D if any (Month/Day/		n Date,	Date, T			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			nd 5) Sec Ben Owr		ount of ities icially d Following	Form (D) o Indire	n: Direct or ect (I)	7. Nature of Indirect Beneficial Ownership	
									ode	v	Amount	nount (A) or Price			Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)
Voting Common Stock 12/10/2024				2024	1			S		4,760	D	\$20.6	826(1)	259,585			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)	3A. Deemed Execution Date, if any (Month/Day/Year)	e, T	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exe	e rcisabl	Expiration e Date	Title	Amour or Number of Shares	er					

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$20.43 to \$21.00, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of securities sold at each separate price within the ranges set forth in this footnote 1 to this Form 4.

/s/ Peter Butterfield

12/12/2024

** 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.