FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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:							

	ction 1(b).	nuc. occ		Filed	pursu or S	ant to Section 3	ection 60(h) of	16(a) the li	of the nvestm	Secur	ities Exchanç ompany Act o	ge Act of of 1940	f 1934		nou	urs per re	esponse:		0.5
1. Name and Address of Reporting Person* King David R.					2. Issuer Name and Ticker or Trading Symbol Flywire Corp [FLYW]									Relationshi heck all ap	rting Person(s) to Is				
(Last)	(Fii	, , ,				3. Date of Earliest Transaction (Month/Day/Year) 03/04/2024								^ belo	,	le Other (spe below) hnology Officer)	у
C/O FLYWIRE CORPORATION 141 TREMONT STREET, SUITE 10					4. If Amendment, Date of Original Filed (Month/Day/Year)							ne)	lual or Joint/Group Filing (Check A				oplicable		
(Street)	N M.	Α (02111												n filed by M		oorting Per an One Re		
(City)	$ _{\Box}$	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 - N	on-Deriva	tive	Secui	rities	Acq	uired	d, Di	sposed of	f, or E	Benefici	ally Owr	ied				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		θ,	3. Transaction Code (Instr. 8)			Acquired (A) or (D) (Instr. 3, 4 ar		Benefic Owned	es ially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Voting Common Stock				03/04/2024					S ⁽¹⁾		9,366	D	\$27.3	.3 621,568		D			
Voting Co	ommon Sto	ck		03/05/20)24				S ⁽¹⁾		3,502	D	\$27.17	75 618	618,066		66 D		
Voting Co	ommon Sto	ck												276,204			I :	By Revoc Trust ⁽²	
		Та	ble II	- Derivati (e.g., pu							osed of, convertib				d				
Derivative Conversion Date Execurity or Exercise (Month/Day/Year) if a		Exec if any			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		tive ties red	Expiration Date (Month/Day/Year)			7. Title Amou Secur Under Deriva Secur 3 and	int of ities rlying ative ity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	re es ally eg d tion(s)	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	of Ir Ben Owr (Ins	Nature ndirec neficia nersh etr. 4)	
													Amount or Number						

Explanation of Responses:

1. These shares of common stock were automatically sold in a non-discretionary transaction by the Reporting Person in order to cover tax withholding obligations upon the settlement of certain time-based

Date Exercisable

Expiration Date

2. The shares are held by the D R King Revocable Trust Dated 10/05/07, of which the Reporting Person is a trustee. The Reporting Person disclaims beneficial ownership of these shares and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of such shares for purposes of Section 16 or for any other purpose, except to the extent of the Reporting Person's pecuniary interests therein, if any.

(D)

/s/ David R. King

03/06/2024

** 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.