7/5/24, 2:05 PM SEC FORM 4

SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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

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

| 1. Name and Address of Reporting Person* Ahuja Amrita | | | | | 2. Issuer Name and Ticker or Trading Symbol Block, Inc. [SQ] | | | | | | | | (Che | ck all app Direct | ship of Reporting applicable) rector ficer (give title | | 10% O | wner | |
|--|--|-----|----------|-----------------------|---|--|-----|-----|------------------|------|-----------------------------|--|------------------------|----------------------|--|---|--|---|---|
| (Last) (First) (Middle) 1955 BROADWAY SUITE 600 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/02/2024 | | | | | | | | | X | belov | v) `` O & | | below) | epoony |
| (Street) OAKLAND CA 94612 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Inc Line) | lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | son |
| Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | | | ion 2A. Deemed Execution Date, | | | | | | f, or Beneficia es Acquired (A) or Of (D) (Instr. 3, 4 ar | | | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Class A C | Class A Common Stock | | | | 024 | 24 | | | Code | v | Amount 1,973 ⁽¹⁾ | (D) | | Price \$64.37 | Reported Transaction(s) (Instr. 3 and 4) | | D | | |
| -) | ass A Common Stock 07/02/2 ass A Common Stock 07/03/2 | | | | | | | | s ⁽²⁾ | | 3,304 I | | - | \$63.98 \$64.41 | _ | 274,410 272,541 | | D D | |
| 9 | | Tab | ole II - | Derivati (e.g., pu | | | | | | | osed of, convertib | | | | Owne | ed | | | |
| 1. Title of Derivative Security (Instr. 3) | ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | | 4. Transaction Code (Instr. 8) | | | | | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and | | De Se (In | Price of erivative ecurity estr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | y Or Di | D. wnership orm: irect (D) r Indirect) (Instr. 4) | Beneficia Ownershi t (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ablo | Expiration Date | Title | Amo or Num of | ber | | | | | |

Explanation of Responses:

- 1. Represents the number of shares automatically sold to satisfy the Issuer's income tax withholding and remittance obligations in connection with the vesting of restricted stock units.
- 2. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted August 17, 2023.

Remarks:

/s/ Susan Szotek, Attorney-in-

07/05/2024

** 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.