FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 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*  Will 'a Table						2. Issuer Name <b>and</b> Ticker or Trading Symbol AvidXchange Holdings, Inc. [ AVDX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Wilhite Joel					[ [ [ [ ] ] ] ] [ [ ] [ ] [ ] [ ] [ ] [									Direc	tor		10% Ov	vner			
														<b>V</b>	Office below	er (give title		Other (s	specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 08/30/2024									50.01	See Remarks					
C/O AVIDXCHANGE HOLDINGS, INC.						00/30/2024								Soo romands							
1210 AVIDXCHANGE LANE																					
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)													Lille)	Form	filed by On	ne Reporting Person					
CHARLOTTE NC 28206																filed by Mo		Ū			
															Perso						
(City)	(	State)	(Zip)																		
		Tab	le I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	Bene	ficiall	y Own	ed					
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,			3. 4. Securitie Disposed (5)			es Acquired (A) o Of (D) (Instr. 3, 4		A) or , 4 and	5. Amo Securit Benefic Owned Report	ties cially I Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	or F	rice	Transa	ed ction(s) 3 and 4)			(Instr. 4)		
Common Stock 08/30/2					2024	.024			<b>S</b> <sup>(1)</sup>		19,358	Ι	)	\$8.15	5 400,278			D			
		7	able II -								osed of, convertib				Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversic or Exercis Price of Derivative Security	e (Month/Day/Yea	r) if any	emed ion Date, /Day/Year)	n Date, Transa Code (				6. Date Exercis Expiration Date (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		De Se (Ir	Price of crivative curity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amor or Num of Share	ber							

## **Explanation of Responses:**

1. The sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 24, 2024.

## Remarks:

Chief Financial Officer, Senior Vice President

/s/ Ryan Stahl, Attorney-in-09/03/2024 Fact for Joel Wilhite

\*\* 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.