FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

								()			. ,									
1. Name and Address of Reporting Person [*] Drummond Lance F.							2. Issuer Name and Ticker or Trading Symbol <u>AvidXchange Holdings, Inc.</u> [AVDX]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Drammond Dunce 1.													_	ΧC	Direc	tor		10% Ov	wner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/22/2023									Officer (give title below)			Other (below)	specify		
C/O AVIDXCHANGE HOLDINGS, INC.														C Individual or Jaint/Crown Filing (Chaol: Arglischis						
1210 AVIDXCHANGE LANE						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne)						
														ΧF	orm	filed by On	ie Re	porting Pers	ion	
(Street)															Form filed by More than One Reporting Person				orting	
CHARLOTTE NC				28206			0.10	$b = 1/c^{2}$	Tran	6.20	tion Ind	licatio								
		(a				Rui	Rule 10b5-1(c) Transaction Indication													
(City)	City) (State) (Zip)						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	- No	on-Derivat	tive S	Secur	ities Acc	quired,	Dis	posed of	i, or Be	enefic	ially C)wr	ed				
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/)						Execution		ion Date,	Transaction		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)) or 5. Am 4 and Secur Benef Owne Follow		cially I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	e Reported Transaction(s) (Instr. 3 and 4)						
Common Stock ⁽¹⁾ 06/22/20							23		Α		16,134	A	\$10.8	.846 40		6,116		D		
			Tab	le II ·	· Derivativ (e.g., put						osed of, convertib				vne	d		· · · ·		
1. Title of Derivative Security (Instr. 3)	2. Conversi or Exerci Price of Derivativ Security	on Date se (Mon	ansaction hth/Day/Year)	Execution Date, r) if any		4. Transa Code (8)	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable ar Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. Represents restricted stock units ("RSUs") which will vest on the first to occur of (A) the first anniversary of the date of grant or (B) the next occurring annual meeting of the Issuer's stockholders, subject to the Reporting Person's continuous service on the board of directors of the Issuer through such vesting date. Each RSU represents a contingent right to receive one share of common stock of the Issuer and the RSUs have no expiration date.

(D)

Date

Exercisable

Remarks:

<u>/s/ Ryan Stahl, Attorney-in-</u> Fact for Lance Drummond

Amount or Number

Shares

of

Title

Expiration Date

06/26/2023

** 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).

Code

V (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.

OMB APPROVAL

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