Instruction 1(b)

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

OMB APP	ROVAL						
OMB Number: 3235-028							
Estimated average burden							
hours per response.	0.5						

					01 0001	1011 30(11) 01 111e	IIIVCStilic	111 001	iipaiiy 7 tot	01 13	7-10					
1. Name and Address of Reporting Person* <u>Lackey Sarah</u>				2. Issuer Name and Ticker or Trading Symbol Open Lending Corp [LPRO]						Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
<u>Luckey</u>	Durum											_	Directo			
(Loot)	(5:	irot)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)					7	below)	(give title	belov	r (specify v)		
(Last) (First) (Middle) C/O OPEN LENDING CORPORATION					03/15/2024						Ch	Chief Technology Officer				
					4 15 0	and and Date of	. O.d1	. = 1 - 1	(A.4 H- /D -		>	0.10	ati dali ati and	-1-40	Filler (Observe)	V I' Is I .
1501 S. MOPAC EXPRESSWAY, SUITE 450				4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)												2	_	,	Reporting Per	
AUSTIN	T.	X	78746										Form fi Person		e than One Re	oorting
(City)	(Si	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication											
					Che satis	eck this box to indic sfy the affirmative	cate that a defense c	transa ondition	ction was mas of Rule 1	nade p 0b5-1	oursuant (c). See	to a contr Instruction	act, instructio n 10.	n or written	plan that is inten	ded to
		Tab	ole I - Nor	า-Deriva	ative Se	ecurities Ac	quired	, Dis _l	posed o	of, o	r Bene	eficiall	y Owned			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. 5)						es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount		(A) or (D)	Price Reported Transaction(s) (Instr. 3 and 4)		tion(s)		(Instr. 4)
Common	Stock, par	value \$0.01 per	share	03/15/	2024		M		11,532	(1)	A	\$ <mark>0</mark>	64	64,668 D		
Common	Stock, par	value \$0.01 per	share	03/15/	2024		F		2,808	8	D	\$6.67	7 61,860 D			
		1				urities Acqu ls, warrants							Owned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date, Ti	ransaction ode (Instr.		6. Date E Expiratio (Month/E	n Date)	of S Und Deri	itle and A securities lerlying ivative S tr. 3 and	ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Beneficia Ownersh ct (Instr. 4)

Explanation of Responses:

(2)

1. Reflects restricted stock units that upon vesting converted into shares of LPRO common stock.

03/15/2024

- 2. Each restricted stock unit represents a contingent right to receive one share of LPRO common stock
- 3. These restricted stock units vested on March 15, 2024.

Remarks:

Restricted

Stock Units

/s/ Ben Massey, as Attorney-in-03/19/2024 Fact

Amount Number

Shares

11,532

\$0

Expiration

(3)

Date

Title

Common

Stock,

par value \$0.01 per

share

Date

Exercisable

(3)

(D)

11,532

(A)

** Signature of Reporting Person Date

69,881

D

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

M

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.