FORM 4

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 ner 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).

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* Alias Shaler				2. Issuer Name and Ticker or Trading Symbol Repay Holdings Corp [RPAY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner								
(Last)	(Fi	rst) (M	Middle)	N	3. Da 03/1		Trans	action ((Month	n/Day/Year)		X	Office below	′	e esiden	below	(specify)			
3 WEST PACES FERRY ROAD, SUITE 200				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)									
(Street)	ΓA G	A 3	0305											X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip)					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 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day.				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)				4 and Securities Beneficially Owned Follow		s ally following	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 Reported Transaction(s) (Instr. 3 and 4)					(111511.4)								
Class A Common Stock 03/11/20				024			F ⁽¹⁾		1,710	D	\$9.9	98	486,896			D				
Class A Common Stock						75,000					I See footnote ⁽²⁾									
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	perivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			ransaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or Number of Shares							

Explanation of Responses:

- 1. Reflects shares of Class A common stock of the Issuer withheld to cover the Reporting Person's tax liability in connection with the vesting of shares of time-based restricted stock previously reported by the Reporting Person.
- 2. These securities are held directly by a limited liability company, of which Reporting Person owns all of the voting ownership interests and serves as the sole member of its board of managers.

Remarks:

The Reporting Person disclaims beneficial ownership of any securities reported herein as indirectly beneficially owned, except to the extent of his pecuniary interest therein.

/s/Timothy J. Murphy, as Attorney-in-Fact 03/12/2024

** 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.