FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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ashington,	D.C. 2	20549		

on, D.C. 20549	OMB APPROVAL

	OMB Number:	3235-0287
	Estimated average bu	ırden
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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*     Chung Bora					Ren	2. Issuer Name <b>and</b> Ticker or Trading Symbol Remitly Global, Inc. [ RELY ]									(Cł	Relationship neck all app X Direct	licable)	ng Pei	rson(s) to Is: 10% Ov		
(Last)	(Fi	rst) (	Middle)		3. Da 08/0			est Trai	ansaction (Month/Day/Year)							Office below	r (give title )		Other (s below)	specify	
C/O REMITLY GLOBAL, INC. 1111 3RD AVE., 21ST FLOOR					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Lin	6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
(Street) SEATTL	E W	A 9	98101		Bul	Form filed by More than One Reporting Person  Rule 10h5-1(c) Transaction Indication														orting	
(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	e I - Non	-Deriva	ative S	Sec	uritie	es Ac	qu	ired, D	isp	osed	of, or	Ben	eficia	lly Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution Date,			,	Transaction Dispos Code (Instr. 5)		urities Acquired (A) o sed Of (D) (Instr. 3, 4			nd Securit Benefic Owned	ties Form		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
										Code		Amoun	t (A	A) or D)	Price	Report Transa (Instr. 3	ction(s) 3 and 4)			(Instr. 4)	
Common	Stock			08/01/	/2023	2023				M		644	644 <sup>(1)</sup> A		(2)	78,788			D		
		Та		Derivat e.g., pı							•					y Owned	l				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, T Security or Exercise (Month/Day/Year) if any					ransaction Number of			Exp	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	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)	
					Code	v			Dat Exe	ate Ex kercisable Da		piration te	Amount or Number of Shares		r umber f						
Restricted Stock Units (RSUs)	(2)	08/01/2023			М			644		(3)		(3)	Commo Stock		644	\$0	1,933		D		

## **Explanation of Responses:**

- 1. Reflects the vesting of RSUs.
- 2. Each RSU represents a contingent right to receive one (1) share of the issuer's Common Stock upon settlement.
- 3. The RSUs vest in four equal installments on each February 1, May 1, August 1 and November 1 following the grant date and, if not fully vested, shall vest in full on the earlier of (i) the date of the issuer's next annual meeting of stockholders following the grant date and (ii) the date that is one year following the date of grant, subject to the reporting person's provision of service to the issuer through the applicable date.

## Remarks:

/s/ Saema Somalya as 08/03/2023 attorney-in-fact

\*\* 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.