FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden 0.5 hours per response:

msuuc	tion i(b).			riieu							ompany Act of		11934						
1. Name and Address of Reporting Person* <u>Rippel Douglas Richard</u>				2. Issuer Name and Ticker or Trading Symbol FirstCash Holdings, Inc. [FCFS]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner							
(Last) (First) (Middle) 1600 WEST 7TH STREET														Office below	er (give title v)	e	Othe belov	r (specify v)	
(Street) FORT WORTH TX 76102				4. lf .	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person						
(City)	(St	rate) (2	Zip)												1 6130	JII			
		Table	I - No	on-Deriva	tive :	Sec	uritie	s Ac	quired	d, Di	sposed of	, or E	enef	iciall	y Own	ed			
1. Title of \$	Security (Ins	tr. 3)		2. Transacti Date (Month/Day		Exe if a	Deemed cution D ny onth/Day/	ate,	3. Transa Code (8)		4. Securities Disposed Of 5)					es ially Following	Form (D) o	nership : Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o (D)	Pri	се	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common	Stock														1,:	592		D	
Common Stock 01/				01/20/20	1/20/2023				S		92,392(1)	D	\$8	8.77	7,288,628				See footnote ⁽²⁾
Common Stock 01/2			01/23/20	023				S		80,704 ⁽¹⁾	D	\$9	\$90.14 7,2		7,207,924		I	See footnote ⁽²⁾	
Common Stock 01/24/20				023	23		S		33,364(1)	D	\$9	0.91	7,174,560		1 1 1		See footnote ⁽²⁾		
		Tal	ble II								posed of, o				Owne	d			
1. Title of Derivative Security Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any			4. Transaction Code (Instr. 8)				ation [rcisable and Date Year)	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	Price of erivative ecurity nstr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	Owner S Form: Direct or Ind (I) (Ins	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	er					
	nd Address of Douglas	f Reporting Person* Richard																	
(Last) 1600 WE	EST 7TH S	(First) TREET	(M	liddle)															
(Street)	ORTH	TX	76	5102															
(City)		(State)	(Zi	ip)															
		f Reporting Person* oel Revocable	Trus	<u>st</u>															

1. Name and Address of Reporting $\mathsf{Person}^{^\star}$

(First)

TX

(State)

(Middle)

76102

(Zip)

AFF Services, Inc.

FORT WORTH

1600 WEST 7TH STREET

(Last)

(City)

(Last)	(First)	(Middle)
1600 WEST 7TH	STREET	
(Street) FORT WORTH	TX	76102
(City)	(State)	(Zip)

Explanation of Responses:

- 1. Sale is pursuant to a 10b5-1 Preset Diversification Program dated December 5, 2022 under which Mr. Rippel plans to sell up to 1,250,000 shares of FirstCash Holdings, Inc. common stock subject to a minimum price threshold.
- 2. These shares are owned by AFF Services, Inc., which is partially owned and 100% controlled by Douglas R. Rippel Revocable Trust (the "Trust"). The Trust and Douglas Richard Rippel are indirect beneficial owners of the reported securities.

Remarks:

/s/ DOUGLAS R. RIPPEL 01/24/2023

** 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).

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.