FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Bundy Scanlan Agnes					2. Issuer Name and Ticker or Trading Symbol APPFOLIO INC [APPF]									heck a	ationship of Reportii k all applicable) Director			rson(s) to I			
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/27/2023											Office below	er (give title v)		Other (: below)	specify	
70 CASTILIAN DR					4. If Ar	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SANTA BARBARA CA 93117													X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(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. Transact Date (Month/Day					Executy/Year) if any		Deemed ecution Date, ny nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securit Disposed and 5)						3, 4 So B		5. Amount of Securities Beneficially Owned Following		n: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	((A) or (D)	Price	ce Trai		Reported Transaction(s) Instr. 3 and 4)				
Class A Common Stock ⁽¹⁾ 06/27/2						2023			A		921(2)) A		\$0		5,273(3)		D			
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)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) 4. Transaction Code (Instr. 8) Derivative Securitie Acquired (A) or Disposed of (D) (Instr. 3, and 5)				vative irities uired or osed) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Under Deriva Securi (Instr. :					f g	8. Price Deriva Secur (Instr.	ative ity	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Direct or In (I) (II	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code V (A)		(A)	(D)	Date Exercisal			Title	or Nui of	ount nber ares							

${\bf Explanation\ of\ Responses:}$

- 1. The shares are granted pursuant to Issuer's 2015 Stock Incentive Plan and are subject to repurchase by the Issuer. The shares shall vest 100% on the first anniversary of the date of grant.
- 2. Shares deferred by the Reporting Person pursuant to Issuer's Nonemployee Director Deferred Compensation Plan.
- 3. Includes 921 shares deferred by the Reporting Person pursuant to Issuer's Nonemployee Director Deferred Compensation Plan.

Remarks:

<u>/s/ Matthew Mazza as</u>
<u>Attorney-in-Fact for Agnes</u> <u>06/30/2023</u>
<u>Bundy Scanlan</u>

** 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.