FORM 4

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

Washington,	D.C. 20549	9	

OMB APPROVAL								
OMB Number:	3235-0287							
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0.5

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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10h5-

## 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

	ee Instruction																		
1. Name and Address of Reporting Person* <u>Keinan Elly</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Kyndryl Holdings, Inc. [KD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
								)=)		J				Direc			10% Ov		
-					2 Da	2. Data of Farlicat Transaction (Month/Day/Mont)							<b>V</b>	Office belov	er (give title		Other (s	specify	
(Last)	,	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/16/2024								Group President					
ONE VA	NDERBIL	T AVENUE, 15	ΓH FLO	OOR												Oloup .	10010101		
(Street)					4. If A	Amend	ment,	Date c	of Origin	al File	d (Month/Da	ıy/Year	.)	6. Indi	vidual o	r Joint/Grou	p Filing (	Check A	pplicable
NEW YO	ORK N	Y 1	0017											V V	Form	filed by One	e Reporti	na Perso	on
													Form filed by More than One Reporting						
(City)	(S	tate) (2	Zip)												Perso	on		,	J
		Table	I - No	n-Deriva	ative S	Secu	rities	Acq	uired	, Dis	posed of	, or I	3ene	ficially	y Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and Secur Benef Owne		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) (D)	or F	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			12/16/2	024		F		23,685(1)	I	) [	\$35.65	5.65 743,845		D				
		Та	ble II -						,		osed of, convertib			•	Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)			ansaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerc tion Da //Day/\		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indirect) (I) (Instr	ect (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code		v	(A) (D)		Date Exercisable		Expiration Date	Title	Amo or Num of Shar	ber					

## **Explanation of Responses:**

1. Represents the withholding from delivery of shares of Common Stock from the Issuer to satisfy the Reporting Person's tax withholding obligation upon the vesting of 42,830 restricted stock units previously granted on December 16, 2021 to the Reporting Person. These shares of Common Stock were not sold by the Reporting Person but were instead offset from the total number of vested shares of Common Stock received by the Reporting Person from the Issuer.

/s/ Evan Barth, attorney-in-

\*\* 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.