FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	hours per 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

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1. Name and Address of Reporting Person* ARREDONDO FABIOLA R									icker or Trac				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
THULL											X Director			10% Ov	vner			
(Last)	et) (First) (Middle)					oate o		est Tra	insaction (M	onth/	Day/Year)		Officer (give title below)			Other (s below)	specify	
5 WEST MENDENHALL SUITE 105					4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Application) Line)										·			
														X Form f	iled by One	e Repo	orting Perso	n
(Street) BOZEMAN MT 59715				Form filed by More than One Reporting Person														
,					lRι	ıle '	10b5	5-1(0	c) Trans	act	ion Ind	lication						
(City)	(State) (Zip)				$ _{\sqcap}$	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.												
		Tab	le I - Non-l	Deriva	tive	Se	curiti	es A	cquired,	Dis	posed c	of, or Be	neficial	ly Owned	i			
1. Title of Security (Instr. 3) 2. Tra			2. Transac Date Month/Da	action 2A. D Exection Exection 2A. D		Executi	A. Deemed xecution Date,		3. 4. Securitie Transaction Disposed (Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 an		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) o (D)	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)
Common Stock 02.				02/14/2	4/2024				М		344	A	\$0.0	0 1,	928		D	
		1	· `				s, wa	rrant	ts, option	ıs, c	onverti	ble secu	ırities)					•
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/Yea	Co	Transaction Code (Instr				6. Date Exe Expiration (Month/Day	Date		7. Title an Amount of Securities Underlyin Derivative (Instr. 3 a	of s g e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	ode	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares					
Restricted Stock Units	(1)	02/14/2024			M	•	(A)	344	02/14/202	\top	(2)	Common Stock	344	\$0.00	0		D	
Non- Qualified Stock Options (right to buy)	\$1,293.84	02/14/2024			A		171		02/14/2024	(3)	02/13/2031	Common Stock	171	\$0.00	171		D	
Non- Qualified Stock Options (right to	\$1,293.84	02/14/2024		1	A		636		(4)	(02/13/2031	Common Stock	636	\$0.00	636		D	

Explanation of Responses:

- 1. Each restricted stock unit represents a right to receive one share of Fair Isaac common stock contingent upon continued service on the board.
- 3. The reporting person has elected to take her annual cash retainer in the form of stock options pursuant to the Corporation's Compensation Program for Non-Employee Directors.
- 4. The grant will vest on the date of the Corporation's 2025 Annual Shareholder Meeting ("ASM").

Remarks:

/s/ Carrie H. Darling, Attorney-02/16/2024 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.