FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN BENEFICI | AL OWNERSHIP |
|------------------|------------|---------------|--------------|

| | OMB APPROVAL | | | | | | | | |
|-------|-----------------|-----------|--|--|--|--|--|--|--|
| OME | 3 Number: | 3235-0287 | | | | | | | |
| Estir | mated average b | ourden | | | | | | | |
| hour | s 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

| Name and Address of Reporting Person* Schaub Sydney | | | 2. Issuer Name and Ticker or Trading Symbol Opendoor Technologies Inc. [OPEN] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | | | | |
|--|--|---------|--|--|---|---|--|--------------------------------------|--|---------------------------------|---|---|--|--------------------------------------|--|--|------------|--------|
| (Last) | (Last) (First) (Middle) 410 N. SCOTTSDALE ROAD, SUITE 1600 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/09/2024 | | | | | | | | X | | Officer (give title below) Chief Leg | | below) | вреспу |
| (Street) TEMPE AZ 85288 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi | ' | | | | | |
| (City) | (Sta | ate) (Z | 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. | | | | | | | | | | nded to | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securitie Disposed 0 5) | | es Acquired (A) Of (D) (Instr. 3, | | 4 and Securi Benefi Owned | | ties Fo cially (D d Following (I) | | m: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | Code | v | Amount | (A) or (D) | | е | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock 04/09/2 | | | | | /2024 | | S ⁽¹⁾ | | 2,513 D | | \$2 | .73 | 73 1,451,339 | | | 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) | ive Conversion Date (Month/Day/Year) y Price of Derivative Security Conversion Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execut | | 4. Transa Code (8) | Instr. | tr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | nt er | | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. This sale was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on August 11, 2023.

Remarks:

/s/ Carrie Wheeler, Attorneyin-fact

04/09/2024

** 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.