FORM 4

UNITED STATES SECU

Washington, D.C. 20549

JRITIES AND EXCHANGE COMMISSION

OMB APPROVAL								
OMB Number:	3235-0287							
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0.5

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

ı	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 10b5-1(c). See
	Instruction 10.

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* Scadina Mark R					2. Issuer Name and Ticker or Trading Symbol FAIR ISAAC CORP [FICO]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (chick title Check and					
(Last) (First) (Middle) 5 WEST MENDENHALL, SUITE 105					3. Date of Earliest Transaction (Month/Day/Year) 11/14/2024								Officer (give title below) Other (speed below) EVP, Gen. Counsel & Sec.					
(Street) BOZEMAN MT 59715 (City) (State) (Zip) 4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable le) Form filed by One Reporting Person Form filed by More than One Reporting Person									
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			Transaction te onth/Day/Ye	Execution Date,		Transaction Disposed Of Code (Instr.		es Acquired (A) or Of (D) (Instr. 3, 4 and 5		5. Amount Securities Beneficial Owned For Reported	Forn ly (D) o		Direct Indirect Etr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) or (D)	Price	Transaction (Instr. 3 and				115(1.4)	
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. Transaction Date (Execution Date, if any (Month/Day/Year)		Code (5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
				Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	ni(s)			
Performance Share Units	(1)	11/14/2024		A		3,382 ⁽²⁾		12/09/202	24 ⁽³⁾	(4)	Common Stock	3,382	\$0.00	3,382		D		

Explanation of Responses:

- 1. Each earned performance share unit represents a right to receive one share of Fair Isaac common stock contingent upon continued employment.
- 2. On November 14, 2024, the Leadership Development and Compensation Committee of the Board of Directors of Fair Isaac Corporation determined that the reporting person earned the number of performance share units reported on this Form 4 based on achievement of certain performance metrics.
- 3. The performance share units vest in three equal annual installments commencing on this date and one share will be delivered to the reporting person for each vested unit as soon as practicable thereafter.
- 4. No expiration date.

Remarks:

/s/ Carrie H. Darling, Attorneyin-fact

11/18/2024

** 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.