FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	

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

NT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* Caponecchi Kevin J					EU	2. Issuer Name and Ticker or Trading Symbol EURONET WORLDWIDE, INC. [EEFT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) C/O EURONET WORLDWIDE, INC.						3. Date of Earliest Transaction (Month/Day/Year) 02/22/2024								X Officer (give title Souther (specify below) CEO, epay and APAC Division					
11400 TOMAHAWK CREEK PARKWAY, SUITE 300				4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street)	OD K	S 6	6211					4()				. ,.			Form Perso	filed by Mo on	re thar	n One Rep	orting
(City)	(Si	rate) (2	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 - No	n-Deriva	ative \$	Secu	rities	Acc	quired	, Dis	posed of	, or B	Benefic	ially (Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execution Date,		Transaction Disposed Of Code (Instr. 5)		s Acquired (A) or If (D) (Instr. 3, 4 and		nd S	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) o (D)	r Price	1	Γransa	ed ction(s) 3 and 4)			(Instr. 4)
Common Stock, par value \$0.02 per share 02/22/2				024				A ⁽¹⁾		11,550	A	\$	0 95		5,214		D		
Common Stock, par value \$0.02 per share 02/22/20				024			F ⁽²⁾		5,175	D	\$107	\$107.17		90,039		D			
Common Stock, par value \$0.02 per share															3,039			I	By 401(k) Plan
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year)				Transaction Code (Instr. 8)		vative vative virities vired vr osed) r. 3, 4	6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		Deriva Secur	erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Code	v	(A)	(D)			Expiration Date	Title	Amount or Number of Shares									

Explanation of Responses:

- 1. Vesting of shares from performance-based stock awards granted on December 12, 2018 (359), April 4, 2019 (8,004), December 10, 2019 (389), December 7, 2021 (1,154) and December 6, 2022
- 2. Represents shares surrendered to Euronet Worldwide, Inc. by the Reporting Person to satisfy tax withholding liability obligations associated with the vesting of performance-based restricted stock.

/s/ By Scott Claassen,

Attorney in Fact for Kevin J. 02/26/2024

Caponecchi

** 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.