1. Name and Address of Reporting Person*  
YOUNT SAMUEL  
55 HAWTHORNE STREET  
11TH FLOOR  
SAN FRANCISCO CA 94105

2. Date of Event Requiring Statement (Month/Day/Year)  
01/27/2023

3. Issuer Name and Ticker or Trading Symbol  
NERDWALLET, INC. [NRDS]

4. Relationship of Reporting Person(s) to Issuer  
Director  
Officer (give title below)  
VP, General Manager

5. If Amendment, Date of Original Filed (Month/Day/Year)  
01/30/2023

6. Individual or Joint/Group Filing  
Form filed by One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 4)</th>
<th>2. Amount of Securities Beneficially Owned (Instr. 4)</th>
<th>3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)</th>
<th>4. Nature of Indirect Beneficial Ownership (Instr. 5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class A Common Stock</td>
<td>2,306,618&lt;sup&gt;(1)(2)&lt;/sup&gt;</td>
<td>D</td>
<td></td>
</tr>
</tbody>
</table>

Table II - Derivative Securities Beneficially Owned  
e.g., puts, calls, warrants, options, convertible securities

<table>
<thead>
<tr>
<th>1. Title of Derivative Security (Instr. 4)</th>
<th>2. Date Exercisable and Expiration Date (Month/Day/Year)</th>
<th>3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)</th>
<th>4. Conversion or Exercise Price of Derivative Security</th>
<th>5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)</th>
<th>6. Nature of Indirect Beneficial Ownership (Instr. 5)</th>
</tr>
</thead>
</table>

Explanation of Responses:
1. This Form 3/A is filed to report 1,771,079 shares that were inadvertently omitted from the original Form 3 filed on January 30, 2023.
2. Includes 535,539 Restricted Stock Units payable solely in shares of Class A Common Stock of the Issuer.

Remarks:
/s/ Bridgett Gatewood,  
Attorney-in-Fact for  
Samuel Yount

** Signature of Reporting Person  
09/08/2023

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 5 (b)(v).
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.