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									
hours por 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

1. Name and Address of Reporting Person* PACHLER CHRISTOPH					2. Issuer Name and Ticker or Trading Symbol FaZe Holdings Inc. [FAZE]										ck all application	able)	g Pers	on(s) to Issu 10% Ow Other (s	ner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/31/2023									below))/CFC	below)	,	
720 N. CAHUENGA BLVD.					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)						
(Street) LOS ANGELES CA 90038														X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ite) (.	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.											o satisfy				
		Tab	le I - No	n-Deriv	ative	Sec	curities	Acc	quired,	Disp	osed o	f, or	Bene	ficially	Owned					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Day/Year) Ex		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dis			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership Instr. 4)		
									Code	v	Amount		(A) or (D)	Price	Transacti (Instr. 3 a	tion(s)				
Common Stock 05/3:					1/2023				A		800,00	00 ⁽¹⁾ A		\$0	1,320,000		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				6. Date Exercis Expiration Date (Month/Day/Yea		е	of Se Unde Deriv	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	OI N	mount umber Shares		(Instr. 4)				
Performance Shares	\$0	05/31/2023			A		450,000		(2)		(2)	Comr		50,000	\$ <mark>0</mark>	450,00	00	D		

Explanation of Responses:

- 1. Represents a restricted stock unit award granted to the Reporting Person that will vest in equal monthly installments through December 31, 2024.
- 2. Each performance share represents a contingent right to receive one share of Issuer common stock. Of these performance shares, 300,000 will vest upon the Issuer's common stock achieving a specified price per share and the remaining 150,000 will be earned upon the Issuer's common stock achieving a specified price per share, but will vest in twelve equal monthly installments.

/s/ Christoph Pachler

06/05/2023

** 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.