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

☐ 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.

OMB APPROVAL OMB Number: 3235-0287

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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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 *				2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Chu Mona					Pu	re S	Storag	ge, Inc. [	PS	TG ]					incusic)				
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)									Director10% Owner					
		,	,											_X_ Officer (gi			her (specify	below)	
2555 AUGUSTINE DRIVE							3/13/2024								Chief Accounting Officer				
	(Stre				4. I	f An	nendme	nt, Date O	rigin	al File	ed (MM/D	D/YYY	Y) (	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)	
SANTA CLARA, CA 95054												_	X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(0	City) (Sta	te) (Zi	p)											Form filed by	More than C	one Reporting i	rerson		
1. Title of Security (Instr. 3)	took		Table	I - Non- 2. Trans. 1	Date	2A. I	Deemed	3. Trans. Co (Instr. 8)		4. Sector Dis	urities Acqueosed of (D3, 4 and 5)	pired (A)	) 5. A Fol (Ins	Amount of Securit llowing Reported str. 3 and 4)	ies Beneficia		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
1. Title of Derivate		le II - Dei			ties I			Owned (	· ·		calls, wa	rrant	s, op	otions, conver			10.	11. Nature	
Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date	Executi Date, if	ion (Ins	tr. 8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Expirati	Expiration Date		ities Un ative S 3 and	nderlying ecurity	Derivative Security (Instr. 5)		Ownership Form of Derivative Security: Direct (D) or Indirect		
				C	ode	V	(A)	(D)	Exe	rcisable			Shares	s		(Instr. 4)	4)		

### **Explanation of Responses:**

(1) The shares of Class A Common Stock are to be acquired upon the vesting of a Performance-Based Restricted Stock Unit ("PRSU") award. The Issuer's board of directors (the "board") authorized the issuance of the underlying shares based upon the achievement of certain performance goals for the fiscal year ending February 4, 2024, with vesting subject to the board's determination of performance achievement and consideration of other factors, which occurred on March 13, 2024. As a result, 1/3 of the PRSU will vest on March 20, 2024, with the remaining vesting quarterly in equal installments over the next two years, subject to Reporting Person's Continuous Service (as defined in the Issuer's 2015 Equity Incentive Plan) through such dates.

**Reporting Owners** 

Panarting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Chu Mona								
2555 AUGUSTINE DRIVE			Chief Accounting Officer					
SANTA CLARA, CA 95054								

## **Signatures**

/s/ Todd Wheeler, attorney-in-fact

3/15/2024

\*\*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 control number.