FORM 4

☐ 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
Estimated average burden
hours per response... 0.5

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.	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Pure Storage	e, Inc.			Pı	ıre S	Storag	ge, Inc.	PS	TG]				oncable)			
(Last)	(First)	(First) (Middle)			3. Date of Earliest Transaction (MM/DD/YYYY)							X Director Officer (giv	X_ Director 10% Owner Officer (give title below) Other (specify below)			
C/O PURE S AUGUSTIN			., 2555				4/5	5/20	24							
	(Stree	et)		4.	If An	nendme	nt, Date C	rigiı	nal File	d (MM/D	D/YYYY	() 6. Individual	or Joint/G	roup Filing	(Check Appl	licable Line)
SANTA CLARA, CA 95054 (City) (State) (Zip)													X _ Form filed by One Reporting Person Form filed by More than One Reporting Person			
								•	<u> </u>	1		eneficially Owne			i	i
1. Title of Security (Instr. 3) 2. Trans.		Trans. Date			3. Trans. Co (Instr. 8)	de	4. Securities Acquired (a or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Ownership of In Form: Bene Direct (D) Own	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	V	Amount	(A) or (D)	Price				(I) (Instr. 4)	(IIISII. 4)
Class A Common St	tock		4	4/5/2024			S		7,500	D	\$52.8).		28,896	D	
	Tab	le II - Dei	rivative S	ecurities	Bene	eficially	Owned (e.g.,	puts, c	alls, wa	rrants	s, options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deeme Execution Date, if any	(Instr. 8)	Acqui Dispo		per of ve Securities d (A) or d of (D) , 4 and 5)	and	6. Date Exercisable and Expiration Date		Securit Deriva (Instr. 2	and Amount of ies Underlying tive Security 3 and 4)	derlying curity Security (Instr. 5)	Securities Beneficially Owned Following	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	ode V ((D)	Dat Exe	e rcisable	Expiration Date		Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses:

(1) The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$52.80 to \$52.82 per share, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Reporting Owners

reporting o macro								
Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Pure Storage, Inc. C/O PURE STORAGE, INC.								
2555 AUGUSTINE DRIVE	X							
SANTA CLARA, CA 95054								

Signatures

/s/ Todd Wheeler, attorney-in-fact

4/9/2024

**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.