SEC Form 4	
------------	--

FORM 4

JNITED	STATES	SECUR	TI	ES	AND) EX	(CHA	NGE	COM	MISS	ION

Washington, D.C. 20549

OMB ADDDOV/AL

Form filed by One Reporting Person

Form filed by More than One Reporting

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See		STATEME	NT OF CHANGES IN BENEFICIAL OWN	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
Instruction		File	d pursuant to Section 16(a) of the Securities Exchange Act of 193 or Section 30(h) of the Investment Company Act of 1940	34		hours per response: 0.		
1. Name and <mark>Sivaram</mark>	Address of Reporting Pe <u>Rohan</u>	rson [*]	2. Issuer Name and Ticker or Trading Symbol <u>Confluent, Inc.</u> [CFLT]		all applicabl	, 10% Ow		er
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/28/2023	X	Officer (giv below) Chief	e title Financial (Other (spe below) Officer	cify
	FLUENT, INC. 'ELYN AVENUE		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	/idual or Join	t/Group Filing	(Check App	icable

(Street) MOUNTAIN VIEW	СА	94041
(City)	(State)	(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.

Line) Χ

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Disposed Of (4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		Securities Beneficially	Form: Direct	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount (A) or Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Class A Common Stock	08/28/2023		A		162,541(1)	A	\$0.00	333,508	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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of Deriv Secu Acqu (A) o Dispe of (D	r osed) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y	ate	Deriv	int of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents the grant of restricted stock units ("RSUs"). The RSUs vest as follows: Approximately 10% of the total number of shares initially subject to the RSU Award will vest in two equal quarterly installments, beginning on November 20, 2023, approximately 29% of the total number of shares initially subject to the RSU Award will vest in four equal quarterly installments, beginning on May 20, 2024, and the remainder of the shares subject to the RSU Award will vest in four equal quarterly installments, beginning on May 20, 2025, subject in each case to the reporting person then providing Continuous Service (as defined in the 2021 Equity Incentive Plan) as of such vesting date.

Remarks:

/s/ Melanie Vinson, Attorney-08/30/2023

in-fact

** 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.