FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL 3235-0287 Estimated average burden hours per 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* <u>Henry Alyssa</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol Confluent, Inc. [CFLT] | | | | | | | | | ationship k all app Direc | , | ng Pei | rson(s) to Is | |
|--|--|--|---|----------|--|---|---|-------------------------|--|--------------------|--------------------|---------------------------------------|---|---|---|--|--------|--|---------------------------------------|
| (Last) | Last) (First) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/12/2024 | | | | | | | | | | Office | er (give title v) | | Other (s below) | specify |
| C/O CONFLUENT, INC. 899 W. EVELYN AVENUE | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person | | | | | | |
| | Street) MOUNTAIN VIEW CA 94041 | | | | Form filed by More than One Reporti Person | | | | | | | | | | | orting | | | |
| VIEW | | | | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | |
| (City) | City) (State) (Zip) | | | | 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. | | | | | | | | | | | | | nded to | |
| | | Table | I - Nor | n-Deriva | tive S | ecui | rities | Acq | uired, | Dis | osed of | , or E | 3enet | icially | / Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Deeme cution y nth/Day | Date, | | | | | Acquired (A) or (D) (Instr. 3, 4 and | | 5. Amount of d Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Form: Direct | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount | (A) or (D) Prid | | rice | | | | | (Instr. 4) | |
| Class A Common Stock 06/12/2 | | | | | | 2024 | | A ⁽¹⁾ | | 7,160 | 1 | 4 | \$ <mark>0</mark> | 20,247 | | | 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. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisat Expiration Date (Month/Day/Year) | | te | Amor Secu Unde Deriv Secu | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amou or Numb of Share | er | | | | | | |

Explanation of Responses:

1. Represents the grant of restricted stock units that vest on the earlier of (i) the date of the 2025 Annual Meeting (or the date immediately prior if the Reporting Person's service as a director ends at such meeting); or (ii) the first anniversary of the date of grant.

in-Fact

/s/ Melanie Vinson, Attorney-06/14/2024

** 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 Number.