FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

\	D C	20540	
Washington,	D.C.	20549	

STATEMENT	OF CH	ANGES IN	BENEFICIAL	OWNERSHIP
SIAIEMENI	OF CH	ANGES IN	DENEFICIAL	OWNERSHIP

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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(0). 0	ee mstructio	11 10.																	
1. Name ar Phan K		of Reporting Perso	n*						ker or T		Symbol				all app	o of Reportir licable)	ng Pe	. ,	
riiaii N	<u>.ong</u>				1					,					Direc	tor		10% Ov	wner
														1	Office	er (give title v)		Other (s	specify
(Last) (First) (Middle) C/O CONFLUENT, INC.				te of E $0/202$		Trans	saction	(Montl	n/Day/Year)			Chief Accounting Officer							
					100/2	0/202													
899 W. EVELYN AVENUE																			
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable Line)								
MOUNT	'A INI				1								۱۲	IIIe)	Form	filed by On	o Don	orting Doro	on
VIEW	AIIV	CA	94041		1									V		•		•	
VILW														Form filed by More than One Reporting Person					
(City)		State)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of	Security (I	nstr. 3)		2. Transacti	on	2A. De	emed		3.		4. Securities				5. Amo	ount of			7. Nature
Date (Month/Day/			Year) Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 3, 4 8)			str. 3, 4 an	Benefi		icially (D		D) or Indirect	of Indirect Beneficial Ownership					
						,	Code	v	Amount	(A) or	Price		Reported Transaction(s) (Instr. 3 and 4)		(7 (-		(Instr. 4)		
										Ľ	7	(D)	1		(Instr.	3 and 4)			
Class A C	Common	Stock		09/20/20	024				S		190(1)	D	\$20.1	2(2)	12	4,652		D	
		T	able II	- Derivati	ive Se	curit	ties /	Acqu	ıired,	Disp	osed of,	or Be	neficia	lly (Owne	d			
											convertib								
Security or Exercise (Month/Day/Year) if any			ition Date, Transac Code (In		5. Number of le (Instr. Derivative		6. Date Exercisable and Expiration Date 7. Title and Amount of			8. Price of Derivative		9. Number of derivative		10. Ownership	11. Nature of Indirect				
							(Month/Day/Year) Se			Secur	Securities		ecurity Securities		Form:	Form:	Beneficial		
(Instr. 3)	(Instr. 3) Price of Month/Day/Year)				8)	8) Securiti Acquire			Underlying Derivative				(Instr. 5)		Beneficially Owned	ially Direct (D)		Ownership t (Instr. 4)	
	Security					(A) or Security (Ins				1		Following Reported			ľ <i>′</i>				
					of (D)		3 and 4)		4)			Transaction(s)							
					(Instr									(Instr. 4)					
					1 1		<u> </u>	 		Amount		1							
													or						
									Date		Expiration		Number of						
			1		Code	١v	(A)	(D)	Exerc	isable	Date	Title	Shares						

Explanation of Responses:

- 1. Represents the number of shares sold by the reporting person to cover the tax obligation realized upon the vesting of restricted stock units previously reported in Table I.
- 2. The shares were sold at prices ranging from \$20.11 to \$20.12. The reporting person will provide to the SEC, the issuer or security holder of the issuer, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

/s/ Melanie Vinson, Attorneyin-Fact

09/24/2024

** 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.