FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject
o Section 16. Form 4 or Form 5
bligations may continue. See
nstruction 1(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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*  Rose Geoffrey Beran						2. Issuer Name <b>and</b> Ticker or Trading Symbol Pulmonx Corp [ LUNG ]									k all app Direc	tor er (give title	ng Pei	10% Ov Other (s	wner
(Last) (First) (Middle) C/O PULMONX CORPORATION 700 CHESAPEAKE DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 07/15/2021										ief Comm	iercia	, ,	
(Street) REDWO	OOD CA	A 9	4063		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	,				on
(City)	(St		Zip)													•			
		Table	I - No	on-Deriva	tive	Secui	rities	s Acc	quirec	d, Dis	sposed of	, or B	eneti	cially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					.	if any	emed tion Date, n/Day/Year)		3. Transaction Code (Instr. 8)			Acquired (A) ( (D) (Instr. 3, 4		and 5)   Securit		ties cially I Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	v	Amount	(A) or (D)	Price	1	Transa	action(s) 3 and 4)			(		
Common	07/15/2	021				S <sup>(1)</sup>		758	D	\$37	37.57 <sup>(2)</sup>		180,127		D				
Common Stock 07/15/20						)21					6,142	D	\$38	\$38.86 <sup>(3)</sup>		173,985		D	
Common Stock 07/15/2					)21				S <sup>(1)</sup>		100	D	\$3	\$39.24		173,885		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)  3. 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)			ation D		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Dei Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date		Amour or Numbe of Shares	er					

## **Explanation of Responses:**

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on December 14, 2020.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$37.14 to \$38.06, 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
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$38.20 to \$39.18, 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.

## Remarks:

/s/ Lauren Cristina, Attorney-

07/19/2021 in-Fact for Geoffrey Beran

Rose

\*\* 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.