## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D	.C. 20549
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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1/h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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(c). Si	ee Instruction	10.																		
Name and Address of Reporting Person*     French Glendon E. III				2. Issuer Name <b>and</b> Ticker or Trading Symbol Pulmonx Corp [ LUNG ]									(CI	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
FIGHER GREHUUH E. III									-					Dire			10% Ov	·		
(Last) (First) (Middle) C/O PULMONX CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 10/17/2024									Offic belo	er (give title w)		Other (s below)	specify	
700 CHESAPEAKE DRIVE																				
					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
(Street)							,				- (	J	,	Lin	Line)					
REDWO	OD		40.62													n filed by On		•		
CITY	CA	A 9	4063												Forr Pers	n filed by Mo on	re tha	ın One Repo	orting	
(City)	(St	ate) (2	Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Exec if any	Deemed cution Date, y nth/Day/Year)		3. Transaction Code (Instr. 8)  4. Securities Acquired (ADISPOSE OF (D) (Instr. 3)				d Secur Benet Owne	Securities Beneficially Owned Following		n: Direct or Indirect	7. Nature of Indirect Beneficial Ownership			
										v	Amount	(A) or (D)		Price	Trans	Reported Fransaction(s) Instr. 3 and 4)			(Instr. 4)	
Common Stock 10/17/2									<b>S</b> <sup>(1)</sup>		20,000	I	)	\$6.52	(2) 1,0	91,974		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Conversion or Exercise Price of Derivative Security				4. Transaction Code (Instr. 8)		_	rative rities ired r osed )	ber 6. Date Ex Expiration (Month/Dates		isable and	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Nur of	ount nber res						

## **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 June 10, 2024.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$6.50 to \$6.73, 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

/s/ Lauren Cristina, Attorneyin-Fact

10/21/2024

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.