							v	Vashin	gton, D	.C. 20	549					OM	B APPRO	VAL
	this box if no lo		STA		NT C	FC	HAN	IGE	S IN	BE	NEFICIA		WNE	RSHIP		MB Num		3235-028
to Section 16. Form 4 or Form 5 obligations may continue. See													Estimated average burden hours per response:		en 0			
Instruc	tion 1(b).			Filed	l pursu or S	ection 3	Section 30(h) d	of the l) of the Investm	Secur ent Co	ities Exchange ompany Act of	e Act o f 1940	f 1934					<u> </u>
1. Name ar	nd Address of	Reporting Person*								rading	g Symbol			Relations		orting P	erson(s) to Is	suer
Abdiel	Capital N	<u>Management,</u>	LLC			<u>cut,</u>	Inc.						`		ector		X 10% O	wner
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 03/07/2024							Officer (give title Other (specify below) below)							
C/O ABI	DIEL CAPI	TAL			4. lf	 If Amendment, Date of Original Filed (Month/Day/Year) 							6	6. Individual or Joint/Group Filing (Check Applicabl				
90 PARK	K AVENUE	, 29TH FLOOR				+. In Ameriament, Date of Original Filed (Month/Day/Tear)								Line) Form filed by One Reporting Person				
(Street)														V Fo	m filed by		an One Rep	
NEW YO	ORK NY	Y 1	0016			Rule 10b5-1(c) Transaction Indication												
(0)1)		-+-)	7:)		^{Ru}		-cut	· 1(C)) ITal	1580		callo	ווע					
(City)	(St	ate) (2	Zip)			Check t satisfy t	this boy the affir	to ind mative	icate tha defense	t a trar condi	nsaction was ma tions of Rule 10	ade pur)b5-1(c)	suant to a . See Inst	contract, in ruction 10.	struction or	written p	lan that is inte	nded to
		Table	I - No	on-Deriva	ative	Secu	rities	s Acc	quirec	l, Dis	sposed of	, or B	enefic	ially Ow	ned			
1. Title of s	Security (Ins	tr. 3)		2. Transact	ion		eemed ution D		3. Transa	etion	4. Securities				nount of rities			7. Nature Indirect
Date (Month/Day						Code (Instr. 5)			d Of (D) (Instr. 3, 4		Bene	ficially ed Followin	(D)	or Indirect	Benefici Owners			
									Code	v	Amount	(A) (D)	or Price		rted saction(s) : 3 and 4)		!	(Instr. 4)
										-			+	(inst	. 5 and 4)	_		By
																		Abdiel
Class A Common Stock			03/07/2024		24			S	5,083,362	D	\$4.	45 1	190,616			Qualifi Master		
																		Fund,
													_					LP ⁽¹⁾
																	I	By Abdiel
Class A Common Stock			03/07/2024				S		190,616	D	\$4.	45	0			Capital		
																		LP ⁽¹⁾
		Tal	ble II								oosed of, o				ed			
1. Title of	2.	3. Transaction		eemed	4.	-	5. Ni	umber	6. Dat	e Exer	cisable and	7. Title	e and	8. Price c			10.	11. Na
Derivative Security	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)		ition Date,	Code	Insaction of de (Instr. Derivative Securities Acquired (A) or		Expiration Date (Month/Day/Year)			Amount of Securities		Security	Derivative derivativ Security Securitie (Instr. 5) Beneficia		s Form:	of Ind Benef Owne	
(Instr. 3)		ve		n/Day/Tear)	8)					Underlying Derivative Security (Instr.		(instr. 5)	Owned Following		or Indirect (I) (Instr. 4	(Instr.		
							Disp of (D	osed))				3 and	4)		Report Transa	ed ction(s)		
							(Inst and	r. 3, 4 5)							(Instr. 4	-)		
													Amount or]				
									Date		Expiration	-	Number of					
		<u> </u>	<u> </u>		Code	<u> v</u>	(A)	(D)	Exerc	Isable	Date	Title	Shares					<u> </u>
1. Name ar	nd Address of	f Reporting Person*																

7. Nature of Indirect Beneficial Ownership (Instr. 4)

By Abdiel Qualified Master Fund, LP⁽¹⁾

11. Nature of Indirect Beneficial Ownership (Instr. 4)

0.5

C/O ABDIEL C	APITAL	
90 PARK AVEN	UE, 29TH FLO	OR
, (Street)		
NEW YORK	NY	10016
(City)	(State)	(Zip)
1. Name and Addres	ss of Reporting Pers	son [*]
Abdiel Quali	fied Master Fi	und LP
(Last)	(First)	(Middle)
C/O ABDIEL C	APITAL	
90 PARK AVEN	UE, 29TH FLO	OR

(Street)

NEW YORK	NY	10016
(City)	(State)	(Zip)
1. Name and Addrese Abdiel Capita	ss of Reporting Person [*] a <u>l LP</u>	
(Last)	(First)	(Middle)
C/O ABDIEL C	APITAL	
90 PARK AVEN	UE, 29TH FLOOR	
(Street) NEW YORK	NY	10016
(City)	(State)	(Zip)
	ss of Reporting Person [*] al Advisors, LP	
(Last)	(First)	(Middle)
C/O ABDIEL C	APITAL	
90 PARK AVEN	IUE, 29TH FLOOR	
(Street) NEW YORK	NY	10016
(City)	(State)	(Zip)
1. Name and Addres Moran Colin	ss of Reporting Person [*] T.	
(Last)	(First)	(Middle)
C/O ABDIEL C		
90 PARK AVEN	UE, 29TH FLOOR	
(Street) NEW YORK	NY	10016
(City)	(State)	(Zip)

Explanation of Responses:

1. The share numbers in Column 5 represent the aggregated holdings of Abdiel Qualified Master Fund, LP ("AQMF") and Abdiel Capital, LP ("ACLP"). Abdiel Capital Management, LLC is the general partner of AQMF and ACLP, and Abdiel Capital Advisors, LP serves as the investment manager of AQMF and ACLP. Colin T. Moran is the managing member of Abdiel Capital Management, LLC and Abdiel Capital Partners, LLC, which is the general partner of Abdiel Capital Advisors, LP. By virtue of the foregoing relationships, each of the Reporting Persons may be deemed to beneficially own the securities held by AQMF and ACLP. Each Reporting Person disclaims beneficial ownership of such securities, except to the extent of its or his pecuniary interest therein.

<u>By: /s/ Colin T. Moran as</u>	
managing member of Abdiel	03/11/2024
Capital Management, LLC	
By: /s/ Colin T. Moran as	
managing member of Abdiel	
Capital Management, LLC,	03/11/2024
general partner of Abdiel	
Qualified Master Fund, LP	
By: /s/ Colin T. Moran as	
managing member of Abdiel	
Capital Management, LLC,	03/11/2024
general partner of Abdiel	
Capital, LP	
<u>By: /s/ Colin T. Moran as</u>	
managing member of Abdiel	
Capital Partners, LLC, general	03/11/2024
partner of Abdiel Capital	
Advisors, LP	
<u>By: /s/ Colin T. Moran,</u>	02/11/2024
individually	03/11/2024
** 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.