

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
OMB Number:	3235-0104
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* <u>Accel Leaders 3 GP Associates L.L.C.</u> <hr/> (Last) (First) (Middle) 500 UNIVERSITY AVENUE <hr/> (Street) PALO ALTO CA 94301 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 09/09/2022	3. Issuer Name and Ticker or Trading Symbol <u>Freshworks Inc. [ FRSH ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director _____ 10% Owner _____ Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) Member of 10% owner group	5. If Amendment, Date of Original Filed (Month/Day/Year)
		6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person _____ <input checked="" type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Class A Common Stock	91	I	See footnotes <sup>(1)</sup>
Class A Common Stock	4	I	See footnotes <sup>(2)</sup>
Class A Common Stock	5	I	See footnotes <sup>(3)</sup>

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date				

1. Name and Address of Reporting Person* <u>Accel Leaders 3 GP Associates L.L.C.</u> <hr/> (Last) (First) (Middle) 500 UNIVERSITY AVENUE <hr/> (Street) PALO ALTO CA 94301 <hr/> (City) (State) (Zip)		
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1. Name and Address of Reporting Person* <u>Accel Leaders 3 L.P.</u> <hr/> (Last) (First) (Middle) 500 UNIVERSITY AVENUE <hr/> (Street) PALO ALTO CA 94301 <hr/> (City) (State) (Zip)		
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1. Name and Address of Reporting Person\*

Accel Leaders 3 Investors (2020) L.P.

(Last) (First) (Middle)

500 UNIVERSITY AVENUE

(Street)

PALO ALTO CA 94301

(City) (State) (Zip)

1. Name and Address of Reporting Person\*

Accel Leaders 3 Entrepreneurs L.P.

(Last) (First) (Middle)

500 UNIVERSITY AVENUE

(Street)

PALO ALTO CA 94301

(City) (State) (Zip)

**Explanation of Responses:**

1. The shares are held by Accel Leaders 3 L.P. Accel Leaders 3 GP Associates L.L.C. ("AL3A") is the general partner of Accel Leaders 3 L.P. AL3A disclaims ownership of all such shares except to the extent that it has a pecuniary interest therein.
2. The shares are held by Accel Leaders 3 Entrepreneurs L.P. AL3A is the general partner of Accel Leaders 3 Entrepreneurs L.P. AL3A disclaims ownership of all such shares except to the extent that it has a pecuniary interest therein.
3. The shares are held by Accel Leaders 3 Investors (2020) L.P. AL3A is the general partner of Accel Leaders 3 Investors (2020) L.P. AL3A disclaims ownership of all such shares except to the extent that it has a pecuniary interest therein.

**Remarks:**

/s/ Tracy L. Sedlock, as a  
Director of Accel Leaders 09/13/2022  
3 GP Associates L.L.C.

/s/ Tracy L. Sedlock, as a  
Director of Accel Leaders 09/13/2022  
3 L.P.

/s/ Tracy L. Sedlock, as a  
Director of Accel Leaders 09/13/2022  
3 Investors (2020) L.P.

/s/ Tracy L. Sedlock, as a  
Director of Accel Leaders 09/13/2022  
3 Entrepreneurs L.P.

\*\* 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 5 (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.**