FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
---------------	------	-------

Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

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* <u>AUSTIN ROXANNE S</u>					2. Issuer Name and Ticker or Trading Symbol Freshworks Inc. [FRSH]										ationship of Reportir k all applicable) Director		ng Person(s) to Is		
(Last)	(Fi	rst) (f	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/11/2023										Office	r (give title		Other (s below)	specify
C/O FRESHWORKS INC. 2950 S DELAWARE STREET, SUITE 201					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person					.
(Street) SAN MA	(Street) SAN MATEO CA 94403				Dula 10hE 1(a) Transaction Indication									Form filed by More than One Reporting Person					
(City)	(St	ate) (2	Zip)		Rule 10b5-1(c) Transaction Indication X Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See								rsuant to a			uction or writ	ten pla	an that is inte	nded to
		Table	I - No	on-Deriva	tive S	Secu	rities	Acc	quired	d, Dis	posed of	, or E	Benefici	ally	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					Year) Execu		eemed Ition Date, h/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Disposed Of					nd 5) Secur Benef Owne		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)	Price			action(s) 3 and 4)			(Instr. 4)	
Class A Common Stock 09/11/20						023					6,303	D	\$22.0	7 ⁽²⁾ 118,534		8,534		D	
		Tal	ole II								osed of, convertib				wne	k			
1. Title of Derivative Security (Instr. 3)	perivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) of Dispo	f (M) derivative decurities acquired (A) or disposed (D) nstr. 3, 4		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan, adopted March 10, 2023.
- 2. The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$21.88 to \$22.19 per share, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities Exchange Commission, upon request, full information regarding the number of shares sold at each separated price within the range set forth in this footnote.

Remarks:

/s/ Jessica Kapustiak,

09/12/2023

Attorney-in-fact

** 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.