FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Cotter Jennifer Cunningham				2. Issuer Name and Ticker or Trading Symbol PELOTON INTERACTIVE, INC. [PTON]								elationship of ck all applica Director	,						
(Last)	,	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024							X	below)	give title	itent (Other (specify below)		
441 NINTH AVENUE, SIXTH FLOOR				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) NEW YO	ORK N	Y	10001								X	X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)		_ 	Rule 10b5-1(c) Transaction Indication													
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									o satisfy				
		Ta	ble I - Nor	n-Der	ivativ	/e Se	ecurities	s Ac	quired,	Dis	osed c	f, or	Bene	eficially	Owned				
1. Title of Security (Instr. 3) 2. Trans: Date (Month/L				Execution Date Day/Year) if any		xecution Date, fany		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)			5. Amoun Securities Beneficial Owned Fo	Forn		: Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount (A) o			Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A Common Stock								136,983(1)			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)	1. Title of Derivative Conversion Date Security Or Exercise (Month/Day/Year) If any			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisal		xpiration ate	Title	0	Amount or Number of Shares		(Instr. 4)			
Restricted Stock Unit (RSU)	(2)	03/01/2024			A		989,011		(3)		(3)	Class Comm Stoc	ion 9	989,011	\$0	989,0	11	D	

Explanation of Responses:

- 1. Includes 2,500 shares of Class A Common Stock acquired under the Issuer's employee stock purchase plan on February 28, 2024.
- 2. Each Restricted Stock Unit ("RSU") represents a contingent right to receive one share of the Issuer's Class A Common Stock.
- 3. The RSUs vest as to 6.25% of the total shares quarterly, commencing May 15, 2024, with 100% of the total shares vested on February 15, 2028, subject to the reporting person's provision of service to the issuer on each vesting date.

Remarks:

/s/ Bart Goldstein as attorneyin-fact for Jennifer Cotter

03/04/2024

** 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.