FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	D C	20540
Washington,	D.C.	20049

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* Baig Saqib			2. Issuer Name and Ticker or Trading Symbol PELOTON INTERACTIVE, INC. [PTON]							[Che	eck all application	ationship of Reporting Pe k all applicable) Director Officer (give title		on(s) to Issu 10% Ow Other (sp	ner			
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024							below)	ief Accountin		below)	Decity	
C/O PELOTON INTERACTIVE, INC.												Chief Accounting Officer						
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)					_									√ Form fil	ed by One	Repo	rting Person	
NEW YO	ORK N	Y	10001											Form fil Person		e than	One Report	ing
(City)	(S	tate)	(Zip)		_ R	Rule 10b5-1(c) Transaction Indication												
Check this box to indicate that a transaction was made pursuant to a contract, instruthe affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								ct, instruction	or written pl	an that	is intended to	satisfy						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Date,		Transaction Disposed Of Code (Instr.		ties Acquired (A) or I Of (D) (Instr. 3, 4 and		5. Amoun Securities Beneficial Owned For Reported	Form (D) or		Direct Indirect Estr. 4)	7. Nature of indirect Beneficial Ownership Instr. 4)				
							Code	v	Amount	(A) c	Price	Transaction(s) (Instr. 3 and 4)				msu. 4)		
	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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			ansaction Derivative Securities		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 of derivative Securities Beneficially Owned Following Reported Transaction(s)		Ownership of I Form: Ber Direct (D) Ow	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code	Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)			
Restricted Stock Unit (RSU)	(1)	03/01/2024			A		164,836		(2)		(2)	Class A Common Stock	164,836	\$0	164,83	6	D	

Explanation of Responses:

- 1. Each Restricted Stock Unit ("RSU") represents a contingent right to receive one share of the Issuer's Class A Common Stock.
- 2. 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 Saqib Baig

** Signature of Reporting Person Date

03/04/2024

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.