SEC For				OTA	T.C.C											
FORM 4 UNITED			51A	STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB APPROVAL		
Section 16. Form 4 or Form 5 obligations may continue. See					TOF CHANGES IN BENEFICIAL OWNERSHIP								Estimat	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5		
1. Name and Address of Reporting Person* Zanganeh Maky (Last) (First) (Middle) C/O PULSE BIOSCIENCES, INC.					or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol Pulse Biosciences, Inc. [PLSE] 3. Date of Earliest Transaction (Month/Day/Year) 05/19/2022							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) below)			
(Street) HAYWARD CA 94545 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Indivi Line) X							e) <mark>X</mark> Form f Form f	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tab	ole I - Non	-Deriv	ative	e Se	curities	s Ac	quired, D	isposed o	of, or Be	neficiall	y Owned	 		
1. Title of Security (Instr. 3) Date (Month/D						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 5)				Beneficia	es Form ally (D) of Following (I) (I	6. Ownership Form: Direct [D) or Indirect [I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
								Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)		(Instr. 4)	
		-							uired, Dis , options,				Owned			
1. Title of Derivative Security (Instr. 3) 2. 3. Transaction Date Or Exercise Derivative Security 0. 0. 1. Transaction <th colspan="2">Execution Date, if any</th> <th colspan="2">4. Transaction Code (Instr. 8)</th> <th colspan="2">5. Number of</th> <th colspan="2">6. Date Exercisable and Expiration Date (Month/Day/Year)</th> <th colspan="2">7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)</th> <th>8. Price of Derivative Security (Instr. 5)</th> <th>9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)</th> <th>Ownershi Form: Direct (D) or Indirect (I) (Instr. 4</th> <th>11. Nature of Indirect Beneficial Ownership (Instr. 4)</th>		Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number of		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) (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	ode	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$2.14	05/19/2022			Α		20,000		(1)	05/19/2032	Common Stock	20,000	\$0.00	20,000	D	
Stock Option (right to buy)	\$2.14	05/19/2022			A		56,075		(2)	05/19/2032	Common Stock	56,075	\$0.00	56,075	D	

Explanation of Responses:

1. The shares subject to the option will vest in equal monthly installments over a one-year period, subject to the Reporting Person's continued service through each vesting date, with the first such installment occurring on June 19, 2022.

2. The shares subject to the option will vest in equal quarterly installments over a one-year period, subject to the Reporting Person's continued service through each vesting date, with the first such installment occurring on August 19, 2022.

/s/ Kenneth B. Stratton, as	05/23/2022
Attorney-in-Fact	00/20/2022
** Signature of Reporting Person	Date

** Signature of Reporting Person

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.