

OMB APPROVAL	
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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

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>Skonnard Aaron</u> <hr/> (Last) (First) (Middle) C/O PLURALSIGHT, INC. 182 NORTH UNION AVENUE <hr/> (Street) FARMINGTON UT 84025 <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Pluralsight, Inc. [PS]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Co-Founder, CEO, & Chairman</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>12/04/2018</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Class A Common Stock	12/04/2018		s ⁽¹⁾		400	D	\$26.03	125,287	D	
Class A Common Stock								449,827	I	See footnote. ⁽²⁾
Class A Common Stock								60,000	I	See footnote. ⁽³⁾

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		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 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)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person* <u>Skonnard Aaron</u> <hr/> (Last) (First) (Middle) C/O PLURALSIGHT, INC. 182 NORTH UNION AVENUE <hr/> (Street) FARMINGTON UT 84025 <hr/> (City) (State) (Zip)		
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1. Name and Address of Reporting Person *		
Skonnard Consulting, Inc.		
(Last)	(First)	(Middle)
C/O PLURALSIGHT, INC.		
182 NORTH UNION AVENUE		
(Street)		
FARMINGTON	UT	84025
(City)		
(State)	(Zip)	

Explanation of Responses:

1. The sale transaction reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on September 14, 2018.
2. The shares are held of record by Skonnard Consulting, Inc. of which the Reporting Person is an owner.
3. The shares are held of record by the Aaron and Monica Skonnard Revocable Trust of which the Reporting Person is a co-trustee.

Remarks:

[/s/ Matthew Forkner, by power of attorney for Aaron Skonnard](#) [12/06/2018](#)

[/s/ Matthew Forkner, by power of attorney for Skonnard Consulting, Inc.](#) [12/06/2018](#)

** 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.