FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| gton, D.C. 20549 | OMB A |
|------------------|-------|
| | |
| | |

| Washington, D.O. 20040 | OMB APPROVAL | | |
|--|----------------------|-----------|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235-0287 | |
| | Estimated average bu | rden | |

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* HOLT VICTORIA M | | | | | 2. Issuer Name and Ticker or Trading Symbol PIPER SANDLER COMPANIES [PIPR] | | | | | | | | | | tionship of Reporti all applicable) Director | | ng Person(s) to | | | |
|--|---|---------|------|----------|---|---|--|--|-----------------------------------|-------|--------------------|---|------------------------|---|--|----------------------------------|---|--|---|--|
| (Last) | (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2024 | | | | | | | | | Office below | er (give title v) | | Other (s | specify | |
| 800 NICOLLET MALL | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | | | | | | | | | | | | | | X Form filed by One Reporting Person | | | | | | |
| MINNEAPOLIS MN 55402 | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | |
| (City) | (Sta | ate) (Z | 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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | n that is inter | nded to | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | ey/Year) Exec | | Deemed ecution Date, ny onth/Day/Year) | | | | | es Acquired (A Of (D) (Instr. 3, | | , 4 and Securi Benefi Owned | | ies cially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) (D) | Pric | e | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock 03/ | | | | 03/15/ | /2024 | | | | A | | 51(1) | A | | 0 | 6,083 | | | 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) | Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any | | | on Date, | 4. Transaction Code (Instr. 8) | | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5 | rities ired r osed) : 3, 4 | 6. Date I Expirati (Month/I | on Da | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | | | tive derivative by Securities | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code V | | (A) | (D) | Date Exercisable | | Expiration Date | | Number of Shares | | | | | | | |

Explanation of Responses:

1. Dividend equivalents that are paid on shares of phantom stock are deemed reinvested in additional shares of phantom stock as of the payment date. These phantom shares accrue to the reporting person's account in the directors' deferred compensation plan. The shares of phantom stock become payable, in an equal number of shares of common stock, on the last day of the year in which the reporting person's service as a director terminates.

Remarks:

/s/ James Grant for Victoria

03/18/2024

** 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.