SEC Form 4	
FORM	4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

100	Check this box to indicate that a
and the second s	transaction was made pursuant to a
	contract, instruction or written plan
	for the purchase or sale of equity
	securities of the issuer that is
	intended to satisfy the affirmative
	defense conditions of Rule 10b5-
	1(c). See Instruction 10.

### 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

OMB APPROVAL						
MB Number:	3235-028					

OMB Number: 3235-0287 Estimated average burder hours per response: 0.5

1. Name and Address of Reporting Person <sup>*</sup> Carey William Robert (Last) (First) (Middle) C/O COUCHBASE, INC. 3250 OLCOTT STREET			2. Issuer Name and Ticker or Trading Symbol <u>Couchbase, Inc.</u> [ BASE ] 3. Date of Earliest Transaction (Month/Day/Year) 08/28/2024	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify below) below) Chief Accounting Officer				
(Street) SANTA CLARA (City)	CA (State)	95054 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Filing ( Form filed by One Report Form filed by More than ( Person	ting Person		

#### 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)					5. Amount of Securities Beneficially Owned Following Reported	Form: Direct	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	08/28/2024		A		27,655 <sup>(1)</sup>	Α	\$ <mark>0</mark>	74,221	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(0.9.) P	,			,	optiono, e				,									
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. Transa Code ( 8)		of		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Expiration Date (Month/Day/Year)		Expiration Date (Month/Day/Year) s		Amount of		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	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares										

#### Explanation of Responses:

1. Twenty-five percent (25%) of the Restricted Stock Units ("RSUs") will be scheduled to vest on the first quarterly vesting date on or following the one (1) year anniversary of September 15th, 2024, the vesting commencement date, and six and one-quarter percent (6.25%) of the RSUs will be scheduled to vest each quarter on each quarterly vesting date thereafter, subject to the Reporting Person's continued service to the Company. Quarterly vesting dates will fall on the first trading day on or after March 15th, June 15th, September 15th and December 15th.

Remarks:

/s/ Margaret Chow, by Power	
of Attorney for William R.	08/30/2024
Carey	

\*\* 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.