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
In almost a modella S

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Instruction 1(b).

Check this box to indicate that a 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 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). Se	ee Instruction 1	0.																		
1. Name and Address of Reporting Person* <u>Chow Margaret</u>					2. Issuer Name and Ticker or Trading Symbol Couchbase, Inc. [BASE]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
-				- L										1	Office	er (give title		Other (: below)	specify	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)											P & Chief	Leg	,		
C/O COUCHBASE, INC.					11/19/2024															
3250 OLCOTT STREET																				
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
SANTA CA 95054														Form filed by One Reporting Person						
CLARA	CLARA													Form filed by More than One Reporting Person						
(City)	(St	ate) (Ž	Zip)	_																
		Table	I - Non-Deri	vative	e Sec	urit	ties	Acc	quire	ed, Di	sposed o	f, or	Benefic	ially	Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yes					Execution D			Date, Ti			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			nd 5) Secu Bene Own		icially d Following	Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership	
								c	ode	v /	Amount	(A) or (D)	Price			ted action(s) 3 and 4)	(Ins	tr. 4)	(Instr. 4)	
Common Stock 11/19/2024									S		205(1)	D	\$20.00	0002(2)		179,878		D		
		Tal	ole II - Deriva (e.g., _l								posed of, converti				Owne	d				
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)	Cod	4. Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/Day			Amo Secu Unde Deriv	le and unt of urities erlying rative rity (Instr. d 4)	8. Price of Derivativ Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi (Instr. 4)	
				Cod	Code V		(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. The sale reported on this Form 4 represents shares sold by the Reporting Person pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on 10/2/2023.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$20.0000 to \$20.0100, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Remarks:

/s/ Margaret Chow ** Signature of Reporting Person 11/21/2024

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.