FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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|                  |            |  |

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See 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 10b5-1(a). 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

| 1(0). 36  | ee Instruction 1   | 0.      |   |  |         |                                  |         |       |  |                       |   |                 |   |   |  |  |   |                                     |            |
|---|--|---------|---|--|---------|----------------------------------|---------|-------|--|-----------------------|---|-----------------|---|---|--|--|---|-------------------------------------|------------|
| 1. Name and Address of Reporting Person*            |  |         |   | 2. Issuer Name and Ticker or Trading Symbol Couchbase, Inc. [ BASE ] |         |                                  |         |       |  |                       |   |                 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |   |  |  |   |                                     |            |
| <u>Chow Margaret</u>                                |  |         |   |  |         |                                  |         |       |  |                       |   |                 |   | Director 10% Own                                  |  |  |   | vner                                |            |
|   |  |         |   |  |         |                                  |         |       |  |                       |   |                 |   | Į.  | Office below   | er (give title<br>v)                   |   | Other (s                            | specify    |
| (Last)  | (Fir   | ,       | Middle)                                       |  |         |                                  |         | Frans | action (N  | Month                 | /Day/Year)  |                 |   |   |  | P & Chief                              | Legal   | ,                                   |            |
|   | JCHBASE,   |         |   |  | 12/1    | 6/202                            | :4      |       |  |                       |   |                 |   |   |  |  |   |                                     |            |
| 3250 OL   | COTT STR   | REET    |   |  |         |                                  |         |       |  |                       |   |                 |   |   |  |  |   |                                     |            |
| (Street)  |  |         |   |  | 4. If / | Amend                            | ment, D | ate o | f Origina  | al File               | d (Month/Da   | y/Year          | )   |   |  | r Joint/Group                          | Filing  | (Check A                            | pplicable  |
| SANTA   |  |         |   |  |         |                                  |         |       |  |                       |   |                 |   | Line  | <u></u>  | filed by One                           | e Repor   | tina Perso                          | on         |
| CLARA   | CA   | A 9     | 5054  |  |         |                                  |         |       |  |                       |   |                 |   | 1 "   | _  | filed by Mo                            |   | J                                   |            |
|   |  |         |   |  |         |                                  |         |       |  |                       |   |                 |   |   | Perso  | on                                     |   |                                     |            |
| (City)  | (St  | ate) (Ž | Zip)  |  |         |                                  |         |       |  |                       |   |                 |   |   |  |  |   |                                     |            |
|   |  | Table   | I - Noi                                       | n-Deriva   | tive \$ | Secu                             | rities  | Acq   | uired,   | Dis                   | posed of  | , or E          | Bene  | eficial   | ly Own   | ed                                     |   |                                     |            |
| 1. Title of Security (Instr. 3) 2. Transact         |  |         |   |  |         |                                  |         |       |  |                       |   |                 |   |   |  | 7. Nature                              |   |                                     |            |
| Date (Month/Da                                      |  |         | execution Date,<br>if any<br>(Month/Day/Year) |  |         | Transaction Code (Instr. 3, 4 5) |         |       |  |                       | 3, 4 and  | Benefi<br>Owned | cially<br>I Following   | Form:<br>(D) or I<br>(I) (Inst                    | Indirect<br>tr. 4)   | of Indirect<br>Beneficial<br>Ownership |   |                                     |            |
|   |  |         |   |  |         |                                  |         |       | Code   | v                     | Amount  | (A)<br>(D)      | or  | Price   | Report<br>Transa<br>(Instr.  | ed<br>action(s)<br>3 and 4)            |   |                                     | (Instr. 4) |
| Common Stock  |  |         | 12/16/2                                       | 5/2024   |         |                                  |         | F     |  | 10,987 <sup>(1)</sup> |   | )               | \$15.3  | .3 168,891  |  | I                                      | D   |                                     |            |
|   |  | Tal     |   |  |         |                                  |         |       |  |                       | osed of,  |                 |   |   | Owne   | d                                      | ,   |                                     |            |
|   |  |         |   | (e.g., pu  | ıts, ca | alls, v                          | warrar  | nts,  | optio  | ns, c                 | onvertib  | le se           | cur   | ities)  |  |  |   |                                     |            |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | Derivative Conversion Date Execuserity or Exercise (Month/Day/Year) if any |         | if any  | emed 4. Transaction Code (Instr. 8)                                  |         |                                  |         |       | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                       | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>3 and 4) |                 | j (   | . Price of<br>Perivative<br>Security<br>Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | y Di<br>or<br>(I)                      | ).<br>wnership<br>orm:<br>irect (D)<br>· Indirect<br>(Instr. 4) | Beneficia<br>Ownershi<br>(Instr. 4) |            |
|   |  |         |   |  | Code    | v                                | (A)     | (D)   | Date<br>Exercis  | ablo                  | Expiration<br>Date  | Title           | or  | nber  |  |  |   |                                     |            |

## **Explanation of Responses:**

1. Shares sold by the Reporting Person to cover tax withholding obligations in connection with the vesting and settlement of restricted stock units. The sale was to satisfy tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary transaction by the Reporting Person.

## Remarks:

/s/ Margaret Chow

12/18/2024

\*\* 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.