SEC Form 4	1
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FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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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* Chow Margaret (Last) (First) (Middle) C/O COUCHBASE, INC. 3250 OLCOTT STREET		Person*	2. Issuer Name and Ticker or Trading Symbol <u>Couchbase</u> , <u>Inc.</u> [BASE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/25/2024	Officer (give title Other (specify below) below) SVP & Chief Legal Officer							
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) SANTA	СА	95054		Form filed by More than One Reporting Person							
CLARA			Rule 10b5-1(c) Transaction Indication								
(City)	(State)	(Zip)	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								
		Table I Non Dori	ivative Securities Acquired Disposed of or Bong	ficially Owned							

Table 1 Then Bernaute Coounties Acquired, Bioposed Si, of Benenolary Office										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)			Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(1150.4)	(Instr. 4)
Common Stock	07/25/2024		S		2,290(1)	D	\$20.0018(2)	192,458	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)	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)		5. Number of Derivative Securities Acquired (A) or Disposed		of Derivative Securities Acquired (A) or		of Derivative Securities Acquired (A) or		of Expiration Date Derivative (Month/Day/Year) Securities Acquired (A) or			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	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V		of (D) (Instr. 3, 4 and 5) (A) (D)		Date Expiration Exercisable Date		Amount or Number			Transaction(s) (Instr. 4)							

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 \$20.0150, 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 Date

07/29/2024

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.