### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 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)

Check this box to indicate that a 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(c). See Instruction 10. 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* <u>Epstein Jeff</u>						2. Issuer Name and Ticker or Trading Symbol Couchbase, Inc. [ BASE ]								5. Relationship of Reporting Person(s) to Is (Check all applicable)  Director 10% C			n(s) to Issu 10% Ow		
(Last) (First) (Middle) C/O COUCHBASE, INC.					3. Date of Earliest Transaction (Month/Day/Year) 12/02/2024								Offic belo	er (give title v)		Other (s below)	pecify		
3250 OLCOTT STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SANTA CLARA CA 95054														Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	City) (State) (Zip)																		
		Tab	ole I - N	Non-Der	ivativ	e Sec	curit	ties A	cquire	ed, D	isposed o	f, or Be	eneficial	ly Owne	d				
Date				2. Transaction Date (Month/Day/Yea		Execution Date,		Date,			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at			Secur Bene Owne	5. Amount of Securities Beneficially Owned Following		Direct of ndirect I	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price		rted action(s) 3 and 4)			Instr. 4)		
Common Stock 12/02/202					2024	4		M		10,000	A	\$5.15	- 1	38,027	I	)			
Common Stock 12/02/202					2024	1		S		10,000(1)	D	\$20.6257	7(2)	28,027		)			
		-	Table I								sposed of, , convertil			Owned					
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. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			of Securities Underlying		8. Price of Derivativ Security (Instr. 5)		e O s Fe illy D o (I)	0. wnership orm: irect (D) r Indirect ) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
						v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares						
Stock Option (right to buy)	\$5.15	12/02/2024			M		10,000		(3)		06/07/2025	Common Stock 10,00		\$0	51,62	3	D		

### **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 3/11/2024.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$20.2800 to \$20.8600, 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.
- 3. The option is fully vested and immediately exercisable.

## Remarks:

/s/ Margaret Chow, by Power of 12/04/2024 Attorney for Jeff Epstein

\*\* 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.