FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours nor rosponse	o: 0.5									

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

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* BOSTROM SUSAN L				2. Issuer Name <b>and</b> Ticker or Trading Symbol Gitlab Inc. [ GTLB ]							(Che	elationship eck all app C Direct		ng Pers	son(s) to Is				
(Last)	(Fir	st) (N	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/13/2023								Office below	er (give title v)		Other (s below)	specify			
C/O GITLAB INC.					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) NOT APPLIC	ABLE DE	1											2	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)		$ _{\Box}$	ule 10b5-1(c) Transaction Indication  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.								nded to					
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficial	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Date,		Date,			es Acquired (A) o Of (D) (Instr. 3, 4			Benefic Owned	ities Folicially (Display (Dis		n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) (D)	or P	rice		action(s) 3 and 4)			(Instr. 4)
Class A Common Stock 09/1			09/13/2	2023				S		15,000	I	) ;	\$ <mark>51</mark> (1)	260	,869(2)		D		
		Tal									osed of, o				Owned	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)  SA. Deemed Execution Date, if any (Month/Day/Year)  4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rities ired r osed ) : 3, 4	Expiration Da		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		S (1	3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly Ov Fo Dii or (I)	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	per					

## **Explanation of Responses:**

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$51.00 to \$51.02, inclusive. The Reporting Person undertakes to provide to GitLab Inc., any security holder of GitLab Inc., or the staff of the U.S. Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in this footnote 1.
- 2. Includes shares of Class A Common Stock that have not yet vested.

## Remarks:

/s/ Robin Schulman, Attorney-09/15/2023 in-Fact for Susan L. Bostrom

\*\* 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.