FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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| Check this box if no longer subject | |
|-------------------------------------|--|
| to Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* ROBINS BRIAN G | | | | | 2. Issuer Name and Ticker or Trading Symbol Gitlab Inc. [GTLB] | | | | | | | | | k all app Direc | licable) tor | ng Pe | rson(s) to Is | vner | |
|---|--|---------|---------------------------------|------------------------|--|---|----------------------|---|-----------------|----------|--|---------------------|--|---|--|---|--|--|------------|
| (Last) | (Fir | st) (M | ⁄liddle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/18/2023 | | | | | | | | X | Officer (give title below) Chief Financial Officer | | | | specify |
| (Street) NOT APPLICABLE DE | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line) | Individual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (Sta | ate) (Z | Ľip) | | Rule 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 interesting satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | an that is inter | nded to | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Benef | iciall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | Exec y/Year) if any | | Deemed cution Date, y nth/Day/Year) | | | | | s Acquired (A) Of (D) (Instr. 3, | | | | ties cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) or (D) Price | | ice | | ction(s) 3 and 4) | | | (Instr. 4) |
| Class A C | Class A Common Stock 09. | | | 09/18/2 | 2023 | | | F | | 2,511(1) | I | \$ | 47.94 | 484,338 ⁽²⁾ | | | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Security or Exercise (Month/Day/Year) if | | if any | emed ion Date, /Day/Year) | | ransaction of code (Instr. Code (Instr. Code (Instr. Code (Instr. Code (Instruction (Ins | | osed) r. 3, 4 | 6. Date Exerc Expiration Da (Month/Day/\) | | ite | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. 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 | er | | | | | |

Explanation of Responses:

- 1. Represents shares of GitLab Inc.'s (the "Company") Class A Common Stock sold to satisfy the reporting person's tax obligations arising as a result of the vesting of a portion of a restricted stock unit
- 2. Includes shares of Class A Common Stock that have not yet vested. This also includes shares acquired pursuant to the Company's Employee Stock Purchase Plan.

Remarks:

/s/ Robin Schulman, Attorneyin-Fact for Brian G. Robins

09/19/2023

** 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.