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## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## 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

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

Estimated average burden	
hours per response:	0.5

1. Name and Address of Reporting Person <sup>*</sup> Cochran Hope F		on*	2. Issuer Name <b>and</b> Ticker or Trading Symbol MongoDB, Inc. [MDB]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
				X	Director	10% Owner			
(Last) C/O MONGO E		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/12/2018		Officer (give title below)	Other (specify below)			
229 WEST 43RD STREET, 5TH FLOOR			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Group Filing (Check Applicable				
(Street)				X	Form filed by One Rep	orting Person			
NEW YORK	NY	10036			n One Reporting				
(City)	(State)	(Zip)							

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Disposed Of			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)			(Instr. 4)		
Class A Common Stock	07/12/2018		A		737(1)	A	<b>\$52.66</b> <sup>(1)</sup>	737	D		
Class A Common Stock	07/12/2018		A		3,133 <sup>(2)</sup>	A	\$0	3,870	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)		of Deriv Secur Acqu (A) or Dispo of (D)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		cpiration Date Amount of Ionth/Day/Year) Securities			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Code V (A)		, (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	•							

#### Explanation of Responses:

1. Represents 737 shares of fully vested Class A Common Stock of the Issuer issued in lieu of \$38,835.62 in cash compensation pursuant to the Issuer's non-employee director compensation policy.

2. Represents 3,133 restricted stock units acquired pursuant to the Issuer's non-employee director compensation policy. Each restricted stock unit represents a contingent right to receive one share of Class A Common Stock of the Issuer and has no expiration date. The shares underlying the restricted stock unit award shall vest in full on the first anniversary of the grant date, subject to the Reporting Person providing continuous service to the Issuer on such date.

#### **Remarks:**

## /s/ Sarah Ward, Attorney-in-

Fact

07/16/2018

\*\* 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.

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