FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | DC | 20549 |
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| wasiiiigton, | D.C. | 20549 |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average b | ourden | | | | | | | | |
| 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).

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* Pech Cedric | | | | | | 2. Issuer Name and Ticker or Trading Symbol MongoDB, Inc. [MDB] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (specify | | | | | | | | | | | | | | | |
|---|---|--------------------------------|---|----------------------|---|---|--|---|-----------------------------|---|----------------------|-------------------------------|--|---|---|---|---|---|-----------------------------|----------------------------|--|
| | (Last) (First) (Middle) C/O MONGODB, INC. 1633 BROADWAY, 38TH FLOOR | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/04/2021 | | | | | | | | | X Officer (give title Officer (give title below) Chief Revenue Officer | | | | | | |
| (Street) NEW Y(| DRK N | Y | 10019 (Zip) |) | | f Amen /06/20 | | nt, Date | e of Ori | iginal F | iled (Month/ | Line | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | |
| | ` | • | | Non-Deri | vative | e Sec | urit | ies A | cquir | red, C | Disposed | of, o | r Be | neficial | ly Owned | t | | | | \dashv | |
| 1. Title of Security (Instr. 3) | | 0 | 2. Transaction Date (Month/Day/Ye | ear) E | 2A. Deen Execution if any (Month/D | | te, Ti | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and | | | | 5. Amount Securities Beneficial Owned Fo | y | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | С | ode | V A | Amount | (A) or (D) | A) or Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | | | |
| Class A Common Stock | | | 01/04/202 | 1 | | | N | M ⁽¹⁾ | | 5,730 | A | | \$8.4 | 92,398 | | I | | By KW Investments SRL ⁽²⁾ | | | |
| Class A Common Stock | | | 01/04/202 | 1 | L | | S | (1)(3) | | 528 | D | \$ | 344.96 | 91,8 | 91,870 | | . | By KW Investments SRL ⁽²⁾ | | | |
| Class A Common Stock | | | | 01/06/202 | 1 | | | | S ⁽⁴⁾ | | 2 | D | \$348.27(5)(6) | | 41,159 | | D | | | | |
| Class A Common Stock | | | | 01/06/202 | .1 | | | | S ⁽⁴⁾ | | 219 | D | \$ | 351.2 | 40,940 | | D | | | | |
| | | ٦ | Table | II - Deriva (e.a) | | | | | | | sposed o | | | | Owned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Date E: (Month/Day/Year) if | Execu | eemed ution Date, | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Expiration (Month/D | | rcisable and Date | 7. Tir Amo Secu Undo | 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Num derivati Securit Benefic Owned Followi Reporte Transac (Instr. 4 | ive ies cially ing ed ction(s) | 10. Ownersi Form: Direct (I or Indire (I) (Instr. | Benet Owne ct (Instr. | direct ficial ership | |
| | | | | | Code | v | (A) | (D) | Date Exerc | cisable | Expiration Date | Title | | or Number of Shares | | | | | | | |
| Employee Stock Option (Right to Buy) | \$8.4 | 01/04/2021 | | | M ⁽¹⁾ | | | 5,730 | | (7) | 04/05/202 | | | 5,730 | \$0 | 34,375 | | I | | W tments 2) | |

Explanation of Responses:

- $1. \ The \ transaction \ was \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ by \ the \ Reporting \ Person.$
- 2. KW Investments SRL is an Italian limited liability company owned by the Reporting Person and the Reporting Person's spouse.
- 3. Represents the sale of shares of Class A common stock to satisfy the exercise price and the Reporting Person's tax withholding obligations in connection with the Reporting Person's exercise of options.
- 4. Represents the sale of shares of Class A common stock to satisfy the Reporting Person's tax withholding obligations in connection with the non-reportable vesting and settlement of restricted stock units.
- 5. The price reported is a weighted average sales price. The shares were sold in multiple transactions at prices ranging from \$348.20 to \$348.33, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.
- 6. This Form 4/A amends and restates the Form 4 filed on January 6, 2021 which reported an incorrect price for the reported transaction. The correct price for the reported transaction is \$348.27.
- 7. All shares underlying this option are immediately exercisable, subject to a repurchase right in the Issuer's favor which lapses in accordance with the option's vesting schedule. The remaining shares shall vest in 6 equal monthly installments beginning on February 1, 2021, subject to the Reporting Person providing continuous service to the Issuer on each such date.

Remarks:

/s/ Sophie Hubscher, Attorneyin-Fact

01/07/2021

** 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.