## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

	Washington, D.C. 20549	OMB APPROVAL	-
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 OWNE 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 Number: 3235 Estimated average burden hours per response:	5-0287 0.5
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.			
*	2 Jacuar Name and Ticker or Trading Symbol	5 Polationship of Poparting Porson(s) to Issuer	

1. Name and Address of Reporting Person <sup>*</sup> St. Ledger Susan			2. Issuer Name <b>and</b> Ticker or Trading Symbol HashiCorp, Inc. [HCP]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>St. Ledger St</u>	<u>15411</u>			1	Director	10% Owner			
(Last)	(First) (Middle)				Officer (give title below)	Other (specify below)			
C/O HASHICORP, INC.			3. Date of Earliest Transaction (Month/Day/Year) 12/20/2024		President, Worldwide	e Field Ops			
101 SECOND STREET, SUITE 700									
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing (	(Check Applicable			
SAN	СА	94105		1	Form filed by One Reporting Person				
FRANCISCO	FRANCISCO				Form filed by More than 0 Person	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)	3. Transa Code ( 8)				Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Class A Common Stock	12/20/2024		М		43,737	Α	(1)	211,484	D	
Class A Common Stock	12/20/2024		F		22,109(2)	D	\$34.22	189,375	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g. puts calls warrants options

	(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 Deri Sec Acq (A) o Disp of (I	umber vative urities uired or oosed D) (Instr. and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		te of 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				
Restricted Stock Units	(1)	12/20/2024		М			43,737	(3)	(3)	Class A Common Stock	43,737	\$ <u>0</u>	262,423	D	

Explanation of Responses:

1. Each restricted stock unit, or RSU, represents a contingent right to receive one share of Class A Common Stock

2. The reported shares were withheld to satisfy the reporting person's tax liability in connection with the vesting of RSUs.

3. The remaining RSUs vest in six equal quarterly installments beginning on March 20, 2025.

/s/ Paul Warenski, by power of	12/23/2024
attorney	12/23/2024

Date

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.