FORM 4

Check this box if no longer subject

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

| Name and Address of Reporting Person*     Ginsberg Amanda     |   |  |   |                 | 2. Issuer Name <b>and</b> Ticker or Trading Symbol ThredUp Inc. [TDUP] |   |   |                  |  |                                 |                  |   | k all app<br>Direc  | tor   | ng Pers   | 10% O   | wner  |                                       |            |
|---|---|--|---|-----------------|--|---|---|------------------|--|---------------------------------|------------------|---|---|---|---|---|---|---------------------------------------|------------|
| (Last) (First) (Middle) C/O THREDUP INC.                      |   |  |   |                 |  | 3. Date of Earliest Transaction (Month/Day/Year) 02/14/2022 |   |                  |  |                                 |                  |   |   | Office<br>below   | er (give title<br>/)  |   | Other (<br>below)   | specify                               |            |
| 969 BROADWAY, SUITE 200                                       |   |  |   |                 | 4. If A  | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |   |                  |  |                                 |                  |   | 6. Individual or Joint/Group Filing (Check Applicable Line) |   |   |   |   |                                       |            |
| (Street) OAKLA  | ND CA   | A 9  | 4607  |                 |  |   |   |                  |  |                                 |                  |   | X   | Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |   |                                       |            |
| (City)  | (St   | ate) (Z                                    | Zip)  |                 |  |   |   |                  |  |                                 |                  |   |   |   |   |   |   |                                       |            |
|   |   | Table                                      | I - Nor                                     | n-Deriva        | tive S   | Secu  | rities  | Acq              | uired,                                 | Disp                            | osed of          | , or E  | Benef   | iciall  | y Own   | ed  |   |                                       |            |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Day) |   |  |   | Execution Date, |  | Date,   | Transaction Disposed Of (E<br>Code (Instr. 5) |                  | es Acquired (A)<br>Of (D) (Instr. 3, 4 |                                 |                  | 5. Amo<br>Securit<br>Benefic<br>Owned<br>Report | ies<br>cially<br>Following                                  | Form  | : Direct<br>Indirect  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |                                       |            |
|   |   |  |   |                 |  |   |   |                  |  | v                               | Amount           | (A)<br>(D)                                      | or P  | rice  | Transa  | action(s)<br>3 and 4)   |   |                                       | (11301. 4) |
| Class A Common Stock 02/14/2                                  |   |  |   |                 | ′2022  |   |   | A <sup>(1)</sup> |  | 1,203 A                         |                  | 1   | \$ <mark>0</mark>   | 35,105  |   |   | D   |                                       |            |
|   |   | Tal  |   |                 |  |   |   |                  |  |                                 | sed of, onvertib |   |   |   | Owned   | d   |   |                                       |            |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deer<br>Execution<br>if any<br>(Month/I |                 | Transaction of   |   | r<br>osed<br>)<br>r. 3, 4                     | Expiration Dat   |  | ear) Amo<br>Secu<br>Und<br>Deri |                  | e and int of rities rlying ative rity (Ins 4)   | tr.   | Price of<br>rivative<br>curity<br>str. 5)                                       | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y [C  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |            |
|   |   |  |   |                 | Code   | Code V (A) (D)  |   | Date<br>Exercisa | able                                   | Expiration<br>Date              | Title            | of<br>Share                                     |   |   |   |   |   |                                       |            |

## **Explanation of Responses:**

1. Grant of fully vested restricted stock units ("RSUs") under the Issuer's 2021 Stock Option and Incentive Plan in a transaction exempt under Rule 16b-3. Each unit represents a right to receive one share of the Issuer's Class A Common Stock. The Reporting Person elected to receive RSUs in lieu of her annual cash retainer, which retainer is paid in quarterly installments.

## Remarks:

/s/ Alon Rotem, Attorney-in-

Fact

02/16/2022

\*\* 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.