FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235- 0104						
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## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and A	orting Person*	2. Date of E Requiring S (Month/Day 03/25/202	statement /Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol ThredUp Inc. [ TDUP ]							
(Last) C/O THRE 969 BROA	(First) DUP INC. DWAY, SUIT	(Middle)	03/23/202	.1	4. Relationship of Reporting Issuer (Check all applicable)  X Director  X Officer (give title below)  Chief Executive	10% O Other ( below)	wner (specify		/Year)  pint/Group Filing		
OAKLANI (City)	(State)	94607 (Zip)						Person	by More than One Person		
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)						
Common Stock						(1) (11151	. 3)				
Common St	ock				772,784 <sup>(1)</sup>		-				
Common St	ock				772,784 <sup>(1)</sup> Securities Beneficiants, options, converti	Ily Own	ed				
	ock ivative Security	(e.g.,		s, warrai	Securities Beneficia nts, options, converti	Illy Own	ed		6. Nature of Indirect Beneficial Ownership (Instr. 5)		

## **Explanation of Responses:**

1. This holding was inadvertently omitted from the Reporting Person's Form 3 that was filed with the Securities and Exchange Commission on March 25, 2021.

## Remarks:

/s/ Alon Rotem, Attorneyin-Fact 03/31/2021

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.