FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
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).

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 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

. ,	ad Address of				2. Iss	uer Na	me ar	nd Tick	er or Tr	ading	Symbol			5	Relationshi	n of Reporti	na Per	rson(s) to Is	suer		
Name and Address of Reporting Person*     Ramsay Alan						2. Issuer Name <b>and</b> Ticker or Trading Symbol Maplebear Inc. [ CART ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
	<u>y 7 Fidii</u>														Direct Office	ctor er (give title		10% Ov Other (s			
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)								-	,			below)	·		
C/O MAPLEBEAR INC.						10/21/2024								CHIEF ACCOUNTING OFFICER							
50 BEALE STREET, SUITE 600																					
(0)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable								
(Street) SAN														Line)  Form filed by One Reporting Person							
	FRANCISCO CA 94105															Form filed by More than One Reporting					
											Person										
(City)	(St	ate) (2	Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,		3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 8)					d Securi Benefi Owned	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)		Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 10/21/2						2024					2,559	I	5	\$42.9	97 9	6,666		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
				(e.g., pu	ıts, ca	alls, v	warra	ınts,	optio	ns, c	onvertib	le se	cur	ities)	)						
1. Title of Derivative Security (Instr. 3)	ve   Conversion   Date   Execution Date, or Exercise   (Month/Day/Year)   if any			ion Date,	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) or Dispo of (D) (Instr	of Exp		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		; j	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or Nur of	ount nber ires									

## **Explanation of Responses:**

1. The reported sales were effected pursuant to a Rule 10b5-1 trading plan intended to satisfy the affirmative defense conditions of Rule 10b5-1(c), adopted on December 5, 2023.

/s/ Bradley Libuit, Attorney-

10/23/2024

in-Fact

\*\* Signature of Reporting Person

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.