FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	Check this box if no longer subjec
$\neg$	to Section 16. Form 4 or Form 5
_	obligations may continue. See
	Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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1. Name and Address of Reporting Person*  COLE TITILOPE						2. Issuer Name <b>and</b> Ticker or Trading Symbol  Datadog, Inc. [ DDOG ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
COLL	11111101	<u></u>			<u> </u>										X Direc	ctor 10%		10% Ov	vner		
(Last)	(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/07/2023								Office below	er (give title v)		Other (s below)	specify		
C/O DATADOG, INC.						4. If Amendment, Date of Original Filed (Month/Day/Year)								6 11	6. Individual or Joint/Group Filing (Check Applicable						
620 EIGHTH AVENUE, 45TH FLOOR					4. II Amendment, Date of Original Fried (World //Day/Teal)							Line	Line)								
y															X Form filed by One Reporting Person						
(Street)															Form filed by More than One Reporting Person						
, TEW IC	NEW YORK NY 10018				Rule 10b5-1(c) Transaction Indication																
(City)	(St	ate) (7	7in)		Trais 2000 2(0) Traisaction maleation																
(City) (State) (Zip)						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	I - No	n-Deriva	tive Se	ecur	ities	Acc	juired,	Dis	posed of	f, or I	Ben	eficia	lly Owr	ned					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/					Execution Date,			Transaction Code (Instr. 8)  4. Securities Disposed Of (5)						Benefi Owned Follow	ties cially I ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	v	Amount	(A) (D)	or	Price		ted action(s) 3 and 4)								
Class A C	023		S		3,633	I	)	\$95.0	8 3	3,796		)									
Class A Common Stock 06/08/20						023		A		2,603(1)	A	1	\$0.00	.00 6,399		Ι	)				
		Tab	le II -	Derivativ (e.g., pu												d					
1. Title of Derivative Security (Instr. 3)				ition Date,	4. Transaction Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	vative rities nired r osed )	6. Date I Expirati (Month/I	on Da	ate Amou Year) Secur Under Deriva Secur		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y Di or (I)	wnership vrm: rect (D) Indirect (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Expiration		Expiration Date	Title	Amo or Num of Sha	ber							

## Explanation of Responses:

1. Represents the number of shares underlying Restricted Stock Units ("RSUs") granted pursuant to the Issuer's non-employee director compensation policy. Each RSU represents a contingent right to receive one share of Issuer's Class A common stock. The RSUs vest on the earlier of (A) the Company's next annual meeting of stockholders and (B) June 8, 2024, in each case, subject to the Reporting Person's continuous service to the Issuer through the vesting date.

## Remarks:

<u>Titilope Cole, by /s/ Ron A.</u>
<u>Metzger, Attorney-in-Fact</u>
\*\* Signature of Reporting Person

06/09/2023

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 4 (b)(v).
- $^{\star\star} \ \text{Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C.\ 1001\ \text{and}\ 15\ \text{U.S.C.}\ 78 \text{ff(a)}.$

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.