FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANG

	CIVID ALL	, (O )
SES IN BENEFICIAL OWNERSHIP	OMB Number:	3

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

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

Name and Address of Reporting Person*     Sherman J Donald						2. Issuer Name and Ticker or Trading Symbol HUBSPOT INC [ HUBS ]									Check	all app	p of Reportin blicable) ctor er (give title	g Person	10% C	
(Last) (First) (Middle) C/O HUBSPOT, INC.						3. Date of Earliest Transaction (Month/Day/Year) 09/01/2015									X	belov		t and CO	below)	
25 FIRST STREET, 2ND FLOOR					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) CAMBR	treet) CAMBRIDGE MA 02141													Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
(City)	(St	ate) (	Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				, 4 and		5. Amount of Securities Beneficially Owner following		rship irect direct 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount		(A) or (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)				(msu. 4)
Common Stock 09/01/						01/2015					34 D \$		\$45	.35	5 71,706		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
			nsaction of I			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)  Amoun		ount	Deriv Secu	8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code				Date Evercisa		Expiration Of Shares									

## **Explanation of Responses:**

1. Shares withheld by Issuer to cover taxes associated with settlement of restricted stock units.

## Remarks:

fact

\*\* Signature of Reporting Person Date

09/02/2015

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).
- \*\* 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.