FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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| 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 |

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| | or occitori so(ii) or |
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| 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 | |
| | |

| Name and Address of Reporting Person* Yeh Jenny C | | | | | 2. Issuer Name and Ticker or Trading Symbol OOMA INC [OOMA] | | | | | | | | | ck all app | ationship of Reporting Per (all applicable) Director | | | wner |
|---|---|--------------------|---|--------|--|---|--|------|--------------------------|--------------------------------------|---|------------------|---|---|--|----------|--|--------------------------------------|
| (Last) C/O OOI | (F MA, INC. | (First) (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/01/2024 | | | | | | | | - | belov | er (give title v) P, General | Coun | Other (below) | |
| 525 ALMANOR AVE., SUITE 200 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) | VALE C | A 9 | 4085 | _ | | | | | | | | Line) | | | | | on | |
| (City) | (S | | Zip) | | | | | | | | | | | | | | | |
| | | Table | I - Non-Deri | | _ | | | | Dis | | | | | _ | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Exe | Deemed cution Date, ny nth/Day/Year) | | | | ies Acquired (A Of (D) (Instr. 3, | | | Securi Benefi Owned | 5. Amount of Securities Beneficially Owned Following | | : Direct | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount | (A) (D) | or I | Price | | ed ction(s) 3 and 4) | | | (Instr. 4) |
| Common Stock 09/01/2 | | | | 1/2024 | /2024 | | | | | 1,440 | I | D \$10 | | 149,665 | | D | | |
| | | Та | ble II - Deriv (e.g., | | | | | | | osed of, o | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | e (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code | Transaction Code (Instr. | | | | Exerci on Da Day/Y | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | D S (I | Price of erivative ecurity astr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownershi (Instr. 4) |
| | | | | Code | | | | | | | | Amo or Num | | | | | | |

Explanation of Responses:

1. Shares delivered by Reporting Person to Issuer in payment of the withholding tax liability upon vesting of the restricted stock units.

/s/ Jenny C. Yeh

09/04/2024

** 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.