FORM 4

UNITED STATES SECU

Washington, D.C. 20549

| KIII | IES / | AND | EXCF | IANGE | COMM | ISSION |
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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 10b5-1(c). See Instruction 10

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Address of Reporting Person* STANG ERIC B (Last) (First) (Middle) C/O OOMA, INC. 525 ALMANOR AVE., SUITE 200 | | | | | 3.0 | 2. Issuer Name and Ticker or Trading Symbol OOMA INC [OOMA] 3. Date of Earliest Transaction (Month/Day/Year) 08/23/2024 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | (Che | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify below) CEO and Pres. | | | | | | |
|--|--|-------------|---|-----------------------------------|------|--|---|-----|---|---------|---|---|------|--|--|--|------------------|---|------------------------------------|--|
| (Street) SUNNY (City) | | A State) | 94085 (Zip) | on-Der | - | | | | f Original Filed (Month/Day/Year) quired, Disposed of, or Benefi | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| 1. Title of Security (Instr. 3) 2. Trai | | | 2. Trans | ransaction 2A. Deemed | | emed ion Date, | 3. Transaction Code (Instr. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | d (A) o | 5. Amount of Securities Beneficially Owned Following | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) Price | | e | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock 08/23/ | | | | 3/202 | 4 | | | М | | 148,971 | I A | \$6 | 5.04 | 1,270, | 119 | 1 | [] [] | By the Eric Stang & Pamela Stang TR UA 09/02/2004 Stang Family Irust ⁽¹⁾ | | |
| Common Stock | | | | | | | | | | | | | | 533,7 | 50 | I |) | | | |
| | | | Table II | | | | | | | | posed of, converti | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Security or Exercise (Month/Day/Year) if an | | 3A. Deeme Execution if any (Month/Da | n Date, Code (Inst ay/Year) | | (Instr. | on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | te ear) Expiration | 7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4) | | rity ount ober | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownersh Form: Direct (D or Indirec (I) (Instr. | Beneficial Ownership ot (Instr. 4) | |
| Employee Stock | \$6.04 | 08/23/2024 | | | Code | V | (A) | (D) | Exercis. | | 01/05/2025 | Title | Т | 971 | \$0 | 41 | 029 | D | | |

Explanation of Responses:

(right to buy)

- 1. Shares held by the Eric Stang & Pamela Stang Trust U/A 09/02/2004 Stang Family Trust (the "Trust"). Voting and investment power over the shares held by the Trust is exercised by the Reporting Person, as one
- 2. The shares subject to the option are fully vested and exercisable.

/s/ Eric B. Stang

08/27/2024

** 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.