FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB 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).

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

| Name and Address of Reporting Person* Hamamatsu Shigeyuki | | | | 2. Issuer Name and Ticker or Trading Symbol OOMA INC [OOMA] | | | | | | | | | k all app Direc | olicable) etor | ng Person(s) to | | Owner | | |
|--|--|-----------|------------|---|---|--|---|------------------|--------------------------------------|--------------------|--|-----------------------------------|---|-------------------|--|--|-----------|--|--|
| (Last) | (F MA, INC. | irst) (I | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2023 | | | | | | | X | Officer (give title below) Chief Fina | | | Other (s below) Officer | specify | | |
| 525 ALMANOR AVE, SUITE 200 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | r) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | |
| (Street) SUNNYVALE CA 94085 | | | | | | | | | | | | Х | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (\$ | State) (2 | Zip) | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | |
| | | | | | | 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. | | | | | | | | | ended to | | | | |
| | | Table | I - No | n-Deriva | tive S | ecur | rities | Acq | uired, | Dis | posed of | , or E | Benef | iciall | y Owr | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Executi y/Year) if any | | ution Date, | | Transaction Disposed Code (Instr. 5) | | ties Acquired (<i>i</i> d Of (D) (Instr. 3 | | 3, 4 and Sec | | cially 1 | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pr | rice | Report Transa | | | | |
| Common Stock 06/01/2 | | | | | 2023 | | | F ⁽¹⁾ | | 1,045 | I |) \$ | 13.5 | 16 | 169,122 | | D | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | titive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | tion Date, | 4. Transaction Code (Instr. 8) | | 5. Numl of Deriv Secu Acqu (A) o Dispo of (D) (Instr | (Month/Day ative rities ired osed | | | te | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and | | 8. Price of Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Owner Form: Direct or Indi (I) (Ins | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisa | ıble | Expiration Date | Title | Amou or Numb of Share | er | | | | | | |

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.

Remarks:

/s/ Shigeyuki Hamamatsu

06/03/2023

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

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.