FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasiliigtori,	D.C.	20343

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 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)

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* Wang Feng-Ming				2. Issuer Name and Ticker or Trading Symbol AMBARELLA INC [AMBA]									olicable)	g Person(s) to Is				
(Last) 3101 JAY	(Fii	rst) (Middle)	l		3. Date of Earliest Trail 07/01/2014				nsaction (Month/Day/Year)					Officer (give title below)		below	(specify)
(Street) SANTA CLARA CA 95054 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/				Execution Date,				Acquired (A) or (D) (Instr. 3, 4 and 5)			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			action(s) 3 and 4)		(Instr. 4)		
Ordinary Shares 07/01/201)14				S ⁽¹⁾		7,700	D	\$31.6	283 ⁽²⁾		3,633	I	by Acorn Hall Trust ⁽³⁾	
Ordinary	Shares			07/01/20)14				S ⁽¹⁾		1,800	D	\$32.3	375 ⁽⁴⁾		1,833	I	by Acorn Hall Trust ⁽³⁾
Ordinary Shares															3	41,343	D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Security or Exercise (Month/Day/Year) if any Co				Transa	ransaction of ode (Instr. Derivative		Expir	te Exe ation I th/Day		Amount of		Deriv Secu (Inst		ative derivative rity Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V (A)		(A)	(D)	Date Exercisable		Expiration Date	Title	Number of Shares	r						

Explanation of Responses:

- 1. The sales reported on this Form 4 were effected pursuant to Rule 10b5-1 trading plans adopted by the reporting person on March 28, 2013.
- 2. The sale price reported in column 4 of Table I represents the weighted average sale price of the shares sold ranging from \$31.26 to \$32.2535 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the reporting person will provide full information regarding the number of shares sold at each separate price within the ranges set forth in this Form 4.
- 3. Shares held by Acorn Hall Irreversible Trust for the benefit of the reporting person's child. The reporting person disclaims beneficial ownership of these securities, and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or any other purpose.
- 4. The sale price reported in column 4 of Table I represents the weighted average sale price of the shares sold ranging from \$32.26 to \$32.48 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the reporting person will provide full information regarding the number of shares sold at each separate price within the ranges set forth in this Form 4.

By: /s/ Michael Morehead Attorney in Fact For: Feng-

Ming Wang

** Signature of Reporting Person

07/02/2014

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.