Checl

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20549	
vasiliigton,	D.C.	20549	

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

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

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* De Greef-Safft Anne					2. Issuer Name and Ticker or Trading Symbol AMBARELLA INC [AMBA]								(Ch	Relationship eck all app X Direc	,				
(Last)	(Fir	est) (N	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 08/31/2023									Office belov	er (give title v)		Other (s below)	pecify	
3101 JAY STREET					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SANTA CLARA	CA	Λ 9	5054										X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	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.										ided to				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
			Date	Date (Month/Day/Year) Exec		Deemed ecution Date, ny onth/Day/Year)		3. 4. Securitie Transaction Disposed (Code (Instr. 8)		es Acquired (A) Of (D) (Instr. 3, 4		(A) or 3, 4 and	Benefic Owned	ties cially Following	6. Owner Form: I (D) or II (I) (Inst	Direct of the condition	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Ordinary Shares 08/3			08/31/2	/2023				A 3,218		3,218(1)	1	A	\$0.0	7	7,398)		
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\frac{1}{2}	Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		; ;	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Dii or	wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V (A) (D)		Date Expiration Date		Title	or	ount mber ires								

Explanation of Responses:

1. Effective as of August 31, 2023, the Board of Directors approved an annual restricted stock unit grant of 3,218 Ordinary Shares to each independent director. The RSU grant vests as to 1/4th of the Ordinary Shares each three months following the vesting start date of September 15, 2023, so as to be 100% vested on September 15, 2024, subject to continued service with the Company.

By: /s/ Michael Morehead, Attorney-in-Fact For: Anne

09/01/2023

De Greef-Safft

** 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.