| SEC | Form | 4 |
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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

| 1. Name and Address of Reporting Person* <u>PAISLEY CHRISTOPHER B</u> | | | | 2. Issuer Name and Ticker or Trading Symbol <u>AMBARELLA INC</u> [AMBA] | | | | | | | | | | ck all applic | able) | g Pers | son(s) to Issi 10% Ov | | | |
|--|---|--|--|---|--|---|-------|----------|--|---|--------|----------------|---|-------------------------|-----------------------------------|---|--|-------------------------------------|--|--|
| (Last) 3101 JA | (F Y STREET | (First) (Middle) REET | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2023 | | | | | | | | | | Officer below) | (give title | | Other (s below) | specify | |
| (Street) SANTA (City) | CLARA C. | | 95054 (Zip) | | 4. If | Ame | ndmer | nt, Date | e of O | Driginal F | Filed | (Month/Da | y/Year) | | 6. Inc Line) | Form fi | led by One led by Mor | e Repo | ן (Check App orting Person ס One Repor | n |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| | | | Date | Fransaction te onth/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | te, | 3. Transaction Code (Instr. 8) 4. Sect Dispos 5) | | | | | | Securitie Beneficia Owned F | urities Form eficially (D) o | | n: Direct r Indirect Istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | | Price | Transact | | | ľ | (1130. 4) | |
| Ordinary Shares | | | 03/15/ | 3/15/2023 | | | | | М | | 779 | A | | (1) | 35, | ,130 | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/) | Co | ransaction ode (Instr. | | of E | | Expi | Date Exercisable and xpiration Date Month/Day/Year) | | | 7. Title a Amount Securitie Underlyi Derivativ (Instr. 3 a | of s ng re Sec | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s Ily J | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Cc | ode | v | (A) | (D) | Date Exer | e rcisable | Exp | piration te | Title | or Nu of | nount mber ares | | | | | |
| Restricted | | | | 1 | | | 1 | I | | | 1 | | Ordinary | 1 | | | 1 | | | 1 |

Explanation of Responses:

Stock

Units

(1)

1. Each restricted stock unit represents a contingent right to receive one share of Ambarella, Inc. Ordinary Shares.

2. The restricted stock units will vest as to 1/4th of the restricted stock units each three months following the vesting start date of September 15, 2022, so as to be 100% vested on September 15, 2023.

| By: /s/ Michael Morehead, | |
|----------------------------------|------------|
| Attorney-in-Fact For: | 03/17/2023 |
| Christopher Paisley | |
| ** Signature of Reporting Person | Date |

779

\$<u>0</u>0

1.559

D

Ordinary

Shares

09/15/2023⁽²⁾

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).

03/15/2023

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.