Edgar Filing: AMBARELLA INC - Form 4

AMBAREI Form 4 October 18 FORN Check to if no los subject Section Form 4 Form 5 obligati may con <i>See</i> Inst 1(b).	, 2013 M 4 UNITED his box nger to 16. or State Filed pu Section 17	MENT OF (rsuant to Se (a) of the Pu	SECURITIES Washingtor CHANGES IN SECU ection 16(a) of t ablic Utility Ho f the Investmen	h, D.C. 20 N BENEF RITIES he Securi Iding Col	D 549 FICLA ties H mpan	LOWN Exchange y Act of 1	E RSHIP OF Act of 1934, 935 or Section	OMB Number: Expires: Estimated a burden hour response	
<pre>(Print or Type Responses) 1. Name and Address of Reporting Person * Laplante George (Last) (First) (Middle) 3101 JAY STREET</pre>			Symbol AMBARELLA INC [AMBA] 3. Date of Earliest Transaction (Month/Day/Year) 10/17/2013				5. Relationship of Reporting Person(s) to issuer (Check all applicable) <u>Director</u> <u>10% Owner</u> X_Officer (give title <u>000000000000000000000000000000000000</u>		
SANTA C	(Street) LARA, CA 95054	F	Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - Non-	Derivative	Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ate, if Transactio Code	omr Dispos (Instr. 3, 4	ed of (5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Ordinary Shares	10/17/2013		М	15,000	А	\$ 8.82	74,553	D	
Ordinary Shares	10/17/2013		S <u>(1)</u>	15,000	D	\$ 22.0016 (2)	59,553	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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 Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. D S (I
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 8.82	10/17/2013		М	15,000	(3)	03/08/2021	Ordinary Shares	15,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Laplante George 3101 JAY STREET SANTA CLARA, CA 95054			Chief Financial Officer				
Signatures							
/s/ Michael Morehead, by Powe Attorney	er of	10	0/18/2013				
** Signature of Reporting Person			Date				

Explanation of Responses:

- 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).
- (1) The sales reported on this Form 4 were effected pursuant to Rule 10b5-1 trading plans adopted on June 19, 2013.

The sale price reported in column 4 of Table I represents the weighted average sale price of the shares sold ranging from \$22.00 to \$22.03 per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the reporting person will provide full (2) information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4.

An option to purchase 299, 643 shares was granted on March 8, 2011 and was exercised in part prior to the date on which the reporting

person became subject to Section 16. One-fourth of the shares subject to the option vested on March 7, 2012 and one forty-eighth of the (3) shares vest monthly thereafter. This option may be exercised prior to vesting subject to the Company's right to repurchase any shares that fail to vest as of termination of service.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.