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*  KOUREY MICHAEL R     |  |  |   |          | <u>Okta</u>                             | 2. Issuer Name and Ticker or Trading Symbol Okta, Inc. [ OKTA ] |         |     |  |                                      |                 |   |                                   |   | lationship<br>ck all appl<br>Direct                                 | ,   |          | rson(s) to Is   |  |
|--|--|--|---|----------|---|---|---------|-----|--|--------------------------------------|-----------------|---|-----------------------------------|---|---|---|----------|---|--|
| (Last)   | (Fi  | rst) (                                     | Middle)   |          |   | ate of Earliest Transaction (Month/Day/Year) 06/2017            |         |     |  |                                      |                 |   |                                   |   | Officer (give title below)  |   | Other (s | specify   |  |
| C/O OKTA, INC.<br>301 BRANNAN STREET                           |  |  |   |          | 4. If A                                 | 4. If Amendment, Date of Original Filed (Month/Day/Year)        |         |     |  |                                      |                 |   |                                   | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person |   |   |          |   |  |
| (Street)<br>SAN<br>FRANCI                                      | SCO C  | A 9  | 94107   |          |   |   |         |     |  |                                      |                 |   |                                   | X   |   | filed by More   |          | •   |  |
| (City)   | (Si  | tate) (                                    | Zip)  |          |   |   |         |     |  |                                      |                 |   |                                   |   |   |   |          |   |  |
|  |  | Tab  | le I - N  | on-Deriv | ative S                                 | Sec   | urities | Ac  | quired, [  | )isp                                 | osed o          | of, or B  | enefi                             | cially  | / Owne  | d   |          |   |  |
| 1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day) |  |  |   |          |   | Execution Date,   |         |     | 3.<br>Transact<br>Code (In<br>8)                               | nsaction Dispos<br>de (Instr. and 5) |                 | arities Acquired (A sed Of (D) (Instr. 3,   |                                   |   | 5. Amo<br>Securit<br>Benefic<br>Owned<br>Follow<br>Report<br>Transa | ties For<br>cially (D)<br>I Ind<br>ring (Ins  |          | n: Direct<br>or<br>rect (I)   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |   |          |   |   |         |     |  |                                      |                 |   |                                   |   |   |   |          |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)            | 2. Conversion or Exercise Price of Derivative Security   | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |          | 4.<br>Transaction<br>Code (Instr.<br>8) |   |         |     | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                                      |                 | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. 3<br>and 4) |                                   | o<br>D<br>S<br>(I   | . Price<br>f<br>erivative<br>ecurity<br>nstr. 5)                    | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) |          | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr.<br>4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |  |  |   |          | Code                                    | v   | (A)     | (D) | Date<br>Exercisable  |                                      | piration<br>ite | Title   | Amou<br>or<br>Numb<br>of<br>Share | per   |   |   |          |   |  |
| Restricted<br>Stock<br>Units <sup>(1)</sup>                    | \$0.00   | 04/06/2017                                 |   |          | A                                       |   | 11,765  |     | (1)  |                                      | (1)             | Class A<br>Common<br>Stock  | 11,7                              | 65  | \$0.00  | 11,765  |          | D   |  |

## **Explanation of Responses:**

1. Each Restricted Stock Unit ("RSU") represents the right to receive one share of the Issuer's Class A Common Stock. The RSUs vest in full on the earlier of April 6, 2018 or the date immediately prior to the Issuer's next regular annual shareholders meeting, subject to the Reporting Person's continued service to the Issuer through each vesting date.

## Remarks:

/s/ Larissa Schwartz, attorney-04/10/2017 in-fact of the Reporting Person

\*\* Signature of Reporting Person

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.