FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN BENEFIC | IAL OWNERS | HIP |
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| OMB APPROVAL | | | | | | | | | | |
|--------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average | burden | | | | | | | | | |
| hours ner resnonse | . 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* KOUREY MICHAEL R | | | | | | 2. Issuer Name and Ticker or Trading Symbol Okta, Inc. [OKTA] | | | | | | | | | (Ch | elationship eck all applic | , | | | |
| (Last) C/O OK | , | | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 06/13/2020 | | | | | | | | | | Officer below) | (give title | | Other (s | specify | |
| (Street) SAN FRANCI | | | 94105 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line | Individual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (5 | | | . D | -4: | <u> </u> | | | | ina al F | .: | | | | . 4: . : . 1 | h . O | | | | |
| | | Tabi | le I - Non | 1-Deriv | ative | Sec | curiti | les Ac | qu | irea, L | JISI | osea c | or, or i | sen | епсіаі | ly Owned | 1 | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | 2A. Deemed Execution Date if any (Month/Day/Year) | | Code (Insti | | | | | | Benefici | es For ially (D) Following (I) (I | | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | (A (D |) or) | Price | Transaci (Instr. 3 | ction(s) | | | (111501.4) | |
| Class A Common Stock 06/13 | | | | | 3/2020 | /2020 | | | M | | 1,535 | | A | (1) | 1,535 | | D | | | |
| Class A Common Stock | | | | | | | | | | | | | | | | 15 | ,680 | | I | By Trust |
| | | Т | able II - I (| | | | | | | | | sed of onverti | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) 3. Deer Executio if any (Month/E | | Date, | I. Fransaction Code (Instr. 3) | | າ of | | Ex | Date Exe piration I onth/Day | Date | | le and 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Dat Exe | te ercisable | | xpiration ate | Title | 0 N 0 | umber | | | | | |
| Class A Common Stock | (1) | 06/13/2020 | | | M | | | 1,535 | | (2) | | (2) | Class A Commo | n i | 1,535 | \$0.00 | 0 | | 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.
- 2. The RSUs vested in full on June 13, 2020.

Remarks:

/s/ Larissa Schwartz, attorneyin-fact of the Reporting Person ** Signature of Reporting Person

_ Date

06/15/2020

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.