Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL 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

| Name and Address of Reporting Person* Wong Karian | | | | | | 2. Issuer Name and Ticker or Trading Symbol IROBOT CORP [IRBT] | | | | | | | | (Ched | ck all app Direc | , | | rson(s) to Is 10% O Other (| wner |
|--|--|--|----------|---|---|--|----------------------------------|--|------------------|---|--------|------------|--|--|------------------------------------|--|--|---|---|
| (Last) (First) (Middle) C/O IROBOT CORPORATION | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/24/2021 | | | | | | | | X | belov | | | below) | | |
| 8 CROSBY DRIVE | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) BEDFORD MA 01730 | | | | | | | | | | | | | Line) X | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (City) (State) (Zip) | | | | | | | | | | | | | | reist | Л | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | Exe if ar | Deeme cution ly nth/Day | Date, | | | | | | 4 and Securi | | ies cially Following | Form (D) o | vnership n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Transaction(s) (Instr. 3 and 4) | | | | (111501.4) |
| Common Stock 02/24/2 | | | | | 2021 | | | | A ⁽¹⁾ | | 565 | I | A 5 | 0.00 | 15,233 ⁽²⁾ | | | 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) 3. Deemed Execution Date if any (Month/Day/Year) | | on Date, | 4. Transaction Code (Instr. 8) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | De Se (Ir | Price of erivative ecurity estr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

- 1. Represents shares awarded pursuant to Performance Share Units. The Compensation Committee authorized the issuance of the underlying shares based upon iRobot Corporation's achievement of pre-established performance criteria related to operating income goals for the three-year period ended January 2, 2021. These shares will vest on March 9, 2021.
- $2.\ Includes\ 74\ shares\ of\ the\ Issuer's\ Common\ Stock\ purchased\ through\ the\ Issuer's\ 2017\ Employee\ Stock\ Purchase\ Plan.$

Remarks:

/s/ Glen D. Weinstein, 02/26/2021 Attorney-in-Fact

** 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.