SEC Form 4
------------

## 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

STATEMENT O	F CHANGES I	N 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

			of Section So(n) of the investment Company Act of 1940			
1. Name and Address of Reporting Person*         Weinstein Glen Daniel         (Last)       (First)       (Middle)         C/O IROBOT CORPORATION         8 CROSBY DRIVE         (Street)         BEDFORD       MA       01730         (City)       (State)       (Zip)		son*	2. Issuer Name and Ticker or Trading Symbol <u>IROBOT CORP</u> [ IRBT ]		tionship of Reporting Per all applicable) Director Officer (give title	rson(s) to Issuer 10% Owner Other (specify
		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/11/2022		below) EVP and Chief Leg	below) gal Officer
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filin Form filed by One Rep Form filed by More tha Person	orting Person

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		ransaction Dispose code (Instr. 5)		Acquirec (D) (Instr		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	03/11/2022		A <sup>(1)</sup>		10,388	Α	\$0.00	51,611	D	
Common Stock	03/12/2022		F <sup>(2)</sup>		569	D	\$57.32	51,042	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(**5*) [**	,	, .		,					,			
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. Transa Code ( 8)		of Deriv Secu Acqu (A) o Dispe of (D	r osed ) 7. 3, 4	6. Date Exerc Expiration Da (Month/Day/N	ate	Deriv	unt of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 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)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

#### Explanation of Responses:

1. Consists of a restricted stock unit award made pursuant to the iRobot Corporation 2018 Stock Option and Incentive Plan. The restricted stock units vest over a three-year period, at a rate of 33.33% on the first anniversary of the grant date and in equal quarterly installments of 8.33% over the following two years. Vested shares will be delivered to the reporting person as soon as practicable following each vesting date, but in no event later than 30 days after each such vesting date.

2. Consists of shares sold to satisfy tax withholding obligations upon vesting of Restricted Stock Units.

### Remarks:

/s/ Glen D. Weinstein

03/15/2022

\*\* Signature of Reporting Person

son Date

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

 $^{\star}$  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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).