FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, I | D.C. | 20549 |
|---------------|------|-------|
|---------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |
| hours por rosponso       | . 0.5     |  |  |  |  |  |  |  |  |

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

| Instruc  | tion 1(b).  |             |                | Filed  |  |   | ection 16(a)<br>80(h) of the Ir |   |                    |   |  | 934                                     |   | liouis  | э рег гезропзе.                                     |      | <u> </u>          |  |
|--|---|-------------|----------------|--|--|---|---------------------------------|---|--------------------|---|--|---|---|---|---|------|-------------------|--|
| 1. Name and Address of Reporting Person*  Pretlow Paula B  |   |             |                | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Vroom, Inc. [ VRM ] |  |   |                                 |   |                    |   |  | Relationship<br>heck all app<br>X Direc | licable)  | ng Person(s) to   | Owner   | vner |                   |  |
|  | /O VROOM, INC.  |             |                |  |  | 3. Date of Earliest Transaction (Month/Day/Year) 04/26/2021 |                                 |   |                    |   |  |   |   | er (give title<br>v)  | Othe<br>belo  |      | er (specify<br>w) |  |
| 1375 BROADWAY, FLOOR 11                                    |   |             |                |  | 4. If Amendment, Date of Original Filed (Month/Day/Year)       |   |                                 |   |                    |   |  |   | 6. Individual or Joint/Group Filing (Check Applicable Line)       |   |   |      |                   |  |
| (Street) NEW Y   | ORK N   | RK NY 10018 |                |  |  |   |                                 |   |                    |   |  |   |   | X Form filed by One Reporting Person  Form filed by More than One Reporting  Person |   |      |                   |  |
| (City)   | (St   | ate) (Z     | Zip)           |  |  |   |                                 |   |                    |   |  |   |   |   |   |      |                   |  |
|  |   | Table       | I - Noi        | n-Deriva   | tive S   | ecui  | ities Acq                       | uired,  | Dis                | posed of,   | , or Ber   | nefici                                  | ally Own  | ed  |   |      |                   |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da |   |             | Execution Da   |  | ution Date,<br>/   | 3.<br>Transaction<br>Code (Instr.<br>8)                     |                                 | 4. Securities Acquired (ADisposed Of (D) (Instr. 3, 5)                      |                    |   | nd Securit<br>Benefic<br>Owned   | ties<br>cially<br>Following             | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | of Indirect<br>Beneficia<br>Ownersh   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |      |                   |  |
|  |   |             |                |  |  | Code  | v                               | Amount  | (A) or<br>(D)      | Price   |  | ed<br>ction(s)<br>3 and 4)              |   | (Instr. 4)  |   |      |                   |  |
| Common Stock 04/26/  |   |             |                | 2021   |  |   | A                               |   | 285(1)             | A   | \$0.0  | 00                                      | 285   | D   |   |      |                   |  |
| Common Stock 04/26/2                                       |   |             |                |  | 2021   |   |                                 | A   |                    | 7,084(2)  | A  | \$0.0                                   | 00 7  | ,369  | D   |      |                   |  |
|  |   | Tal         |                |  |  |   | ies Acqu<br>varrants,           |   |                    |   |  |   |   | d   |   |      |                   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)        | erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any |             | Transaction of |  | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |   |                                 | 7. Title ar<br>Amount of<br>Securitie<br>Underlyin<br>Derivativ<br>Security | of<br>s<br>ng<br>e | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following | Ownersh<br>Form:                        | Benefic<br>O) Owners<br>ct (Instr. 4                              | rect<br>cial<br>ship  |   |      |                   |  |

## **Explanation of Responses:**

1. Represents an award of restricted stock units that vest in full on June 23, 2021. Each restricted stock unit represents a contingent right to receive one share of Common Stock of the Issuer.

(D)

(A)

(A) or Disposed of (D) (Instr. 3, 4 and 5)

2. Represents an award of restricted stock units, which will vest in three equal annual installments beginning on April 26, 2022. Each restricted stock unit represents a contingent right to receive one share of Common Stock of the Issuer.

Date

Exercisable

## Remarks:

/s/ Alison Klein, Attorney-in-04/28/2021

Title

Expiration

Date

Security (Instr. 3 and 4)

Amount Number

Shares

\*\* Signature of Reporting Person

Following Reported Transaction(s) (Instr. 4)

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).

Code

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.