### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Ty   | pe Response   | s)                             |                       |                |   |   |  |                         |                               |                        |   |            |           |  |                         |
|--|---|--------------------------------|-----------------------|----------------|---|---|--|-------------------------|-------------------------------|------------------------|---|------------|-----------|--|-------------------------|
| Name and Address of Reporting Person* TIRVA ROBERT L.                    |   |                                |                       |                | 2. Issuer Name and Ticker or Trading Symbol SONIM TECHNOLOGIES INC [SONM] |   |  |                         |                               |                        | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner  |            |           |  |                         |
| (Last) (First) (Middle)<br>6836 BEE CAVE ROAD,, BUILDING 1,<br>SUITE 279 |   |                                |                       | 3.1            | 3. Date of Earliest Transaction (Month/Day/Year) 06/18/2021               |   |  |                         |                               |                        | X Officer (give title below) Other (specify below) President, CFO and COO   |            |           |  |                         |
| (Street) AUSTIN, TX 78746  |   |                                |                       |                | 4. If Amendment, Date Original Filed(Month/Day/Year)                      |   |  |                         |                               |                        | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person |            |           |  |                         |
| (City) (State) (Zip)   |   |                                |                       |                | Table I - Non-Derivative Securities Acqui                                 |   |  |                         |                               |                        | ired, Disposed of, or Beneficially Owned  |            |           |  |                         |
| 1.Title of Security (Instr. 3)  2. Transactio Date (Month/Day/           |   |                                | y/Year) Exe           |                | (Instr. 8)  | etion   | on 4. Securities Acquir<br>(A) or Disposed of<br>(Instr. 3, 4 and 5) |                         |                               | Beneficial<br>Reported | nt of Securities<br>Illy Owned Following<br>Transaction(s)  |            | Form:     | 7. Nature of Indirect Beneficial   |                         |
|  |   |                                | (MC                   | onth/Day/Year) | Code  | v   | Amoun  | (A) or (D)              | Price                         | (Instr. 3 and 4)       |   |            | \ /       | Ownership<br>(Instr. 4)  |                         |
| Common Stock 06/   |   |                                | 06/18/202             | 21             |   | A   |  | 334,95                  | 52 A                          | \$ 0                   | 1,051,306   |            |           | D  |                         |
|  |   |                                | Tal                   |                |   | ies Acquir  | ed, D  | isposed o               | of, or Bene                   | eficial                |   | OHID COIII | rol numbe |  |                         |
|  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date (Month/Day | on 3A. D<br>Executany | (e.g.,         | puts, calls, wa<br>4.<br>f Transaction<br>Code<br>) (Instr. 8)            | rrants, options, c<br>5. 6. Date<br>Number and Ex |  | ate Exerc<br>Expiration | Expiration Date ath/Day/Year) |                        | •   |            |           | Ownersh<br>Form of<br>Derivativ<br>Security:<br>Direct (D<br>or Indirect | Ownership (Instr. 4) Co |
|  |   |                                |                       |                | Code V  | (A) (D)   | Date   |                         | Expiration<br>Date            | Title                  | Amount<br>or<br>Number<br>of<br>Shares  |            |           |  |                         |
| Repor  | ting O  | wners                          |                       |                |   |   |  |                         |                               |                        |   |            |           |  |                         |
| Reporting Owner Name /   |   |                                |                       |                | Relationships   |   |  |                         |                               |                        |   |            |           |  |                         |
| Reporting Owner Name / Address   |   |                                | Director 10           | )%             | Officer   |   |  | Other                   |                               |                        |   |            |           |  |                         |

# **Signatures**

TIRVA ROBERT L. 6836 BEE CAVE ROAD,

**BUILDING 1, SUITE 279** AUSTIN, TX 78746

| Robert L. Tirva                 | 06/21/2021 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date       |

Owner

President, CFO and COO

## **Explanation of Responses:**

- \* 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)
- (1) Represents the grant of restricted stock units that vest in one installment on June 18, 2022.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.