| SEC Form 4 |
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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 | | | | | | | | | |

(Instr. 4)

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

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 [*] Don Raahim | | | | 2. Issuer Name and Tick <u>Roadzen Inc.</u> [VI | | Symbol | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | | |
|--|------------------------|----------|--------------------------------------|--|---|---|--|---|---|---|--|--|
| (Last) C/O VAHANN | (First) A TECH EDGE | (Middle) | | 3. Date of Earliest Trans 09/20/2023 | action (Month/ | Day/Year) | X | below) | below) | | | |
| CORP | | | | 4. If Amendment, Date o | f Original Filed | (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| 1230 AVENUE OF THE AMERICAS, 16TH FLOOR | | | H | | | | X Form filed by One Reporting Person | | | son | | |
| | | | | | | | | Form filed by Mo Person | re than One Re | oorting | | |
| (Street) NEW YORK | NY | 10020 | | Rule 10b5-1(c) | Transact | ion Indication | | | | | | |
| (City) | (State) | (Zip) | | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | |
| Date | | | 2. Transactic Date (Month/Day/ | Execution Date, | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |

| | 2 | | <u> </u> | | | | | _ |
|------------|-----------------|----------------|-------------|------------|---------|----------|-------|---|
| Table II - | Derivative Se | curities Acqui | ired, Dispo | sed of, or | Benefi | cially (| Owned | |
| | (e.g., puts, ca | lls, warrants, | options, c | onvertible | securit | ties) | | |

Code

Ιv

Amount

| 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) | | 5. Number 6. Date Exercisable and of Expiration Date Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 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:

Remarks:

/s/ Jaewon Chang, as attorney-09/20/2023

Reported Transaction(s)

(Instr. 3 and 4)

in-fact

(A) or (D)

Price

** 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.