FORM 4

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

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per response	e: 0.5									

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

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*     Hawkins Nicholas B.					2. Issuer Name and Ticker or Trading Symbol Arteris, Inc. [ AIP ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last)	(Fir	,	Middle	2)	3. Date of Earliest Transaction (Month/Day/Year) 05/13/2024							X	Officer (give title below)  VP and Chief I		Other (sp below) Financial Office		·		
900 E. HAMILTON AVE., SUITE 300					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CAMPBELL CA 95008													X Form filed by One Reporting Person Form filed by More than One Reportin Person						
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication  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 - N	Ion-Deriva	tive S	Secui	ities	Ac	quire	d, Di	sposed of	, or E	Benefici	ally	Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/You					Execution Year) if any		ion Date, /Day/Year)				Acquired (A) or (D) (Instr. 3, 4 a		and 5)   5		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price			rted action(s) 3 and 4)			(Instr. 4)
Common Stock 05/13/202					24				<b>S</b> <sup>(1)</sup>		10,000	D	\$8.006	8.0067 <sup>(2)</sup> 242,896 <sup>(3)</sup>			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	nversion Exercise (Month/Day/Year)   Execution Date, if any (Month/Day/Year)   Execution Date, if any (Month/Day/Year)   Secution Date, if any (Month/Day/Year)				5. Nu of Deriv Secul Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired rosed	ve es d (Month/Day/Year)  et d d d d d d d d d d d d d d d d d d d				nt of ities rlying ative ity (Instr. 4)	unt		tive derivative ty Securities	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)   C		cisable	Expiration Date	Title	Number of Shares						

## **Explanation of Responses:**

- 1. Transaction made pursuant to a 10b5-1 trading plan that was adopted by the Reporting Person on May 12, 2023.
- 2. The price reported in Column 4 is a weighted average sale price. These shares were sold in multiple transactions at prices ranging from \$7.44 to \$8.13 inclusive. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. Includes 111,519 restricted stock units

## Remarks:

/s/ Paul Alpern, as Attorneyin-Fact for Nicholas B.

**Hawkins** 

05/14/2024

\*\* 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.