## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

vvasnington,	D.C.	2054

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed 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*			2. Issuer Name <b>and</b> Ticker or Trading Symbol Arteris, Inc. [ AIP ]							Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner									
	TERIS, IN	C.	Middl	le)	3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025						J	Officer (give title Other (spec below) Chief Operating Officer				specify			
(Street) CAMPB (City)	ELL C		9500 Zip)	8	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indiv Line)	·							
			<b>! -</b>	Non-Deriva				_	_	ed, D	-	-		cially	_				
Date		2. Transaction Date (Month/Day/Ye	Execution		on Date,		3. Transaction Code (Instr. 8)					nd 5) Se Be Ov		i. Amount of Securities Seneficially Owned Following		Direct et (I)	7. Nature of Indirect Beneficial Ownership		
						(	Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)		
Common Stock 01/02/2025		5				S <sup>(1)</sup>		2,177	D	\$11.4	1133	48	89,415	I	)				
Common	Stock			01/02/202	5				S <sup>(1)</sup>		2,130	D	\$11.4	1133	48	87,285	I	)	
Common	Stock			01/02/202	5				<b>S</b> <sup>(2)</sup>		18,558	D	\$10.9	501(3)	468,727		D		
Common	Stock			01/03/202	5				S <sup>(2)</sup>		16,966	D	\$12	.08	45	51,761	I	)	
		Та	ble	II - Derivati (e.g., pu							sposed of , converti				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Exe if a	Deemed scution Date, ny onth/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivativ Securitie Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/Date of the control of the contro			Amo Secu Unde Deriv	tle and unt of urities erlying vative urity (Insti	Der Sec (Ins	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	y Di or (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	Code V (A) (I		(D)	Date D) Exercisa		Expiration Date		Amount or Number of Shares						

## Explanation of Responses:

- 1. Shares sold to satisfy the Reporting Person's tax liability arising as a result of the release of restricted stock units.
- 2. Transaction made pursuant to a 10b5-1 trading plan that was adopted by the Reporting Person on March 15, 2024.
- 3. The price reported in Column 4 is a weighted average sale price. These shares were sold in multiple transactions at prices ranging from \$10.90 to \$11.90 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.

## Remarks:

/s/ Paul Alpern, as Attorneyin-Fact for Moll Laurent R \*\* Signature of Reporting Person

01/06/2025

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.