FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

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* <u>Assaderaghi Fariborz</u>					2. Issuer Name and Ticker or Trading Symbol SITIME Corp [SITM]										all app	o of Reportir licable) tor er (give title	ng Pei	rson(s) to Is 10% Ov Other (s	ner
(Last)	(Fir	,	Middle	2)	3. Date of Earliest Transaction (Month/Day/Year) 09/27/2023									X	belov		emar	below)	ыреспу
5451 PATRICK HENRY DR.					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SANTA CLARA CA 95054				X Form filed by One Reporting Person Form filed by More than One Reporting Person															
(City)	(Sta	ate) (Z	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.									ended to					
		Table	I - N	Ion-Deriva	tive S	Secui	rities	Ac	quire	d, Dis	sposed of	, or E	Benefici	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/Y				Executi ear) if any		emed ion Date, /Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Disposed Of (Instr. 8)			Acquire (D) (Ins	ed (A) or tr. 3, 4 and	nd 5) Securi Benefi		cially I Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Tran		saction(s) . 3 and 4)			(Instr. 4)
Common Stock 09/27/20					023				S		1,026	D	\$107.6	⁷ .67 ⁽¹⁾ 1		.02,622 ⁽²⁾		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)	Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any					Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. The reported price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$106.60 to \$108.75 per share, inclusive. The reporting person undertakes to provide to 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.

2. Includes an aggregate of 97,959 shares of common stock issuable pursuant to previously reported restricted stock units and performance-based restricted stock units that have not vested.

Remarks:

Executive Vice President, Engineering & Technology

Samsheer Ahamad, Attorneyin-fact

** Signature of Reporting Person

09/29/2023

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.