Instruction 1(b).

FORM 4

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

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

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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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*  VASHIST RAJESH					2. Issuer Name and Ticker or Trading Symbol SITIME Corp [ SITM ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner						
(Last) C/O SIT	) (First) (Middle) SITIME CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 12/20/2023									$ \begin{array}{ccc} X & \begin{array}{ccc} \text{Officer (give title} & \begin{array}{ccc} \text{Other (specify} \\ \text{below)} \end{array} \end{array} \\ & \begin{array}{ccc} \text{Chief Executive Officer} \end{array} $					
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				Dul	D. I. 401 5.4(a) Transaction In 11. 11.									X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	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 - No	on-Deriva	tive S	Secui	rities	Acc	quirec	d, Dis	posed of	, or B	enefic	ially (	Own	ed				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execution Date,		,	3. Transaction Code (Instr. 8)  4. Securities A Disposed Of (5)							s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transactio		ion(s)			(111341. 4)	
Common Stock 12/20/2					023				S		1,000	D	\$125	5 .	429,655(1)		D			
Common Stock														36,781				See Footnote <sup>(2)</sup>		
		Tal	ble II								osed of, convertib				wne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exercation D h/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		8. Prio Deriva Secur (Instr.	ative ity	9. Number derivative Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	e es ally g	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
				Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares								

## **Explanation of Responses:**

- 1. Includes an aggregate of 271,159 shares of common stock issuable pursuant to previously reported restricted stock units and performance-based restricted stock units that have not vested.
- 2. The reportable securities are owned directly by Aldebran Constellation LLC, of which the Reporting Person is one of the managers and has voting and investment power over the shares.

## Remarks:

Samsheer Ahamad, Attorneyin-fact

12/21/2023

\*\* 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.