

☐ 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 OF SECURITIES

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 * | | | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|-------------------------------------------|---------------------------------|-------------------|-------------------------|---------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------------------|---------------------------------------|------------|-------------------------------------------------|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------|--------------------------------------------|----------------------------|-------------------------|
| BIBAUD SC | OTT A. | | | At | ome | ra In | e [ATO | M] | | | | | | | | |
| (Last) (First) (Middle) | | | | 3. 1 | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | | X_ Director10% Owner | | | |
| (East) (First) (Middle) | | | | | | | | | | , | | _X_ Officer (give title below) Other (specify below) | | | | |
| C/O ATOMERA, INC., 750 | | | | | | | 6/1 | /20 | 23 | | CEO and Pro | esident | | | | |
| UNIVERSIT | | , | ITE 280 | | | | | | | | | | | | | |
| | | | | | If Ame | endmer | nt, Date O | rigin | al File | d (MM/DI | Y) 6. Individual | or Joint/G | roup Filing | Check Appl | icable Line) | |
| | | 22 | | | | | | | | | | | | | | |
| LOS GATOS, CA 95032 | | | | | | | | | | | | X_Form filed by One Reporting Person Form filed by More than One Reporting 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 - | Non-Der | ivativ | e Secu | rities Acq | uire | ed, Dis | posed of | f, or I | Beneficially Owne | ed | | | |
| 1. Title of Security (Instr. 3) | | | Trans. Date | Date 2A. Deemed 3. Trans | | | | | | | 5. Amount of Securities Beneficially Owned | | | 7. Nature | | |
| | | | | Execution Date, if any | | (Instr. 8) | or Disposed of (D) (Instr. 3, 4 and 5) | | Following Reporte (Instr. 3 and 4) | | Transaction(s) | | Ownership Form: | of Indirect Beneficial | | |
| | | | | | , | , | | | | , | | | | | Direct (D) | Ownership |
| | | | | | | | | | | (A) or | | | | | or Indirect (I) (Instr. | (Instr. 4) |
| | | | | | | | Code | V | Amoun | t (Ď) | Price | • | | | 4) | |
| Common Stock 6/1 | | | | 5/1/2023 | 3 | | S | | 1742 (1 | _ | \$9.00 | 316406 | | D | | |
| Common Stock 6/1/20 | | | | 5/1/2023 | | | S | | 568 ⁽¹⁾ | D | \$9.00 |) ; | 315838 | | D | |
| Common Stock 6/1/20 | | | | 5/1/2023 | 23 | | S | | 873 (1) | | \$9.00 | 314965 | | D | | |
| Common Stock 6/1/202 | | | | 5/1/2023 | 2023 | | S | | 4690 (1 | D | \$9.00 | 310275 | | | D | |
| | | | | | | | | | | | | | | | | |
| | Tab | le II - Der | ivative Se | curities | Benef | icially | Owned (| e.g., | puts, c | alls, wa | rrant | s, options, conver | rtible secu | ırities) | | |
| Title of Derivate Security | 2. Conversion or Exercise | 3. Trans. Date | 3A. Deemed Execution | d 4. Trans. (Instr. 8) | | de 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | s and Expiration Date Securit Derivation | | | 7. Title and Amount of Securities Underlying | | | Number of derivative | 10. Ownership | 11. Nature |
| (Instr. 3) | | | Date, if any | | A | | | | | | | tive Security | Security | Securities Beneficially | Form of B | Beneficial |
| | Price of Derivative | | | | | | | | | | (Instr. | 3 and 4) | nd 4) (Instr. 5) | | Derivative Security: | Ownership (Instr. 4) |
| | Security | | | | (| | | | | | | | Owned Following | Direct (D) | (IIISII. 4) | |
| | | | | | | | | Date | , | Expiration | | Amount or Number of | 1 | Reported Transaction(s) | or Indirect | |
| | | | | Code | v | (A) | (D) | | rcisable | | | Shares | | (Instr. 4) | (1) (Instr. 4) | |
| | | | • | • | | | • | | | | | | | | | 1 |

Explanation of Responses:

(1) Represents the number of shares sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of restricted stock grants that were previously reported. This sale is to satisfy mandatory non-discretionary tax withholding obligations by a "sell to cover" transaction.

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|-------------------------------------------------------------------------------------------------|---------------|-----------|-------------------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| BIBAUD SCOTT A. C/O ATOMERA, INC. 750 UNIVERSITY AVENUE, SUITE 280 LOS GATOS, CA 95032 | X | | CEO and President | | | | |

Signatures

/s/ Scott A. Bibaud, by Mindi Zimmer, as Attorney-in-Fact

6/2/2023

**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 control number.