### FORM 4

☐ 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 that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## 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)					
Mears Robert J					Atomera Inc [ ATOM ]									Director		100/	0		
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)									Director10% Owner  X Officer (give title below) Other (specify below)					
C/O ATOMERA, INC., 750						2/21/2024								Chief Technology Officer					
UNIVERSITY AVENUE, SUITE 280																			
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								6.	6. Individual or Joint/Group Filing (Check Applicable Line)					
LOS GATOS, CA 95032													X	X_Form filed by One Reporting Person					
(City) (State) (Zip)														Form filed by More than One Reporting Person					
		,	Table I -	- Non-Do	rivat	tive Secu	ırities A	cquii	red, Di	isposed	of,	or Be	nefic	cially Owne	d				
1. Title of Security (Instr. 3) 2. Trans. E				. Trans. Dat	Exe	Deemed cution e, if any	on (Instr. 8)				osed of (D)		Follo	Direct (D) Ownership			of Indirect Beneficial Ownership		
							Code	V	Amo			Price	е				or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock 2/21/202				2/21/2024			A		30,96	0 (1)	<b>\</b>	\$0				144,763	D		
Common Stock																2,666	I	By Spouse	
	Tab	le II - Deri	vative S	Securitie	Ben	eficially	Owned	l ( <i>e.g.</i>	, puts,	calls, w	arr	rants,	opti	ions, conver	tible secu	ırities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deem Execution Date, if an	Code		5. Number of Derivative Securitie Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date		Se De	7. Title and Securities U Derivative (Instr. 3 and		erlying urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	10. Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Code	V	(A)	(D)	Dat Exe	e rcisable	Expiratio Date	n Ti	itle	N	amount or lumber of hares		Reported Transaction(s) (Instr. 4)	or Indirect		
Incentive Stock Option (right to buy)	\$6.46	2/21/2024		A		15,8	885		(2)	2/21/2034		Common Stock	n	15,885	\$0	15,885	D		
Non-Qualified Stock Option (right to buy)	\$6.46	2/21/2024		A		44,8	899		(2)	2/21/2034	1	Common Stock	on	44,899	\$0	44,899	D		

#### **Explanation of Responses:**

- (1) 6.25% shall vest each quarter for the next 48 months commencing on June 1, 2024
- (2) 6.25% shall vest each quarter for the next 48 months commencing on June 1, 2024

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Mears Robert J C/O ATOMERA, INC. 750 UNIVERSITY AVENUE, SUITE 280 LOS GATOS, CA 95032			Chief Technology Officer	•				

/s/ by Mindi Zimmer, as Attorney-in-Fact For: Robert J. Mears

2/22/2024

\*\*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 control number.