FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Levensohn Pascal				2. Issuer Name and Ticker or Trading Symbol SHOTSPOTTER, INC [SSTI]										tionship of R all applicab Director	eporting Person(s) to Issuer e) 10% Owner			vner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 02/27/2023									Officer (g below)	ive title		Other (s below)	specify
CHEMIN DU CONNETABLE 8, 1223 COLOGNY				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv	dividual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person						
(Street) GENEVA V8															Form file	d by More	than O	ne Reportin	g Person
(City)	(State)	(Zi _l	o)																
		Та	ble I - Nor	n-Deri	ivativ	e Se	curitie	s Acqı	uired, l	Disp	osed of,	or l	Benefi	cially Ow	ned				
Date				th/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)					ties Acquired (A) or d Of (D) (Instr. 3, 4 ar			Securities Beneficially Following	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		nership : Direct (D) lirect (I) : 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount		(A) or (D)	Price	(Instr. 3 and				(Instr. 4)	
Common Stock 02/2					27/2023				A		561(1))	A	\$0.00	23,4	23,471		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable ar Expiration Date (Month/Day/Year)		7. Title and Am Securities Und Derivative Secu (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)			Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	on(s)		

Explanation of Responses:

1. Represents Restricted Stock Units ("RSUs"). All of the RSUs subject to this Award vest on March 17, 2023. In addition, all such RSUs will vest upon a Change in Control (as defined in the Plan) or immediately prior to the effectiveness of the Participant's resignation or removal (and contingent upon the effectiveness of a Change in Control) in the event that the Participant is required to resign his position as a member of the Board of Directors as a condition of the Change in Control or is removed from his position as a member of the Board of Directors in connection with the Change in Control. Notwithstanding the foregoing, vesting shall terminate upon the Participant's termination of Continuous Service.

Remarks:

<u>Pascal Levensohn, by /s/ Ron A.</u> <u>Metzger, Attorney-in-Fact</u>

** Signature of Reporting Person Date

03/15/2023

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.