FORM 4

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

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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 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

(Print or Ty	pe Response	es)													
Name an Ames Pau	d Address o	2. Issuer Name and Ticker or Trading Symbol SHOTSPOTTER, INC [SSTI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
C/O SHO BLVD, S	TSPOTTE	(First) ER INC., 7979 G.		3. Date of Earliest Transaction (Month/Day/Year) 03/13/2019						X Officer (give title below) Other (specify below) SVP Products and Technology			ow)		
(Street) NEWARK, CA 94560				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person					
(City		(State)	(Zip)		Table	e I - Non	-Deri	ivative Se	ecurities	s Acqui	ired, Dispose	d of, or Ber	neficially Ow	ned	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		(A) or Disposed of (D)			Beneficially Owned Following Reported Transaction(s)			Ownership of Form:	7. Nature of Indirect Beneficial Ownership	
				(Month/Day/	y ear)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and	4)		Direct (D) or Indirect (I) (Instr. 4)	
Common	Stock		03/13/2019			M		4,060	A	\$ 0.85	37,371			D	
Common	Stock		03/13/2019			M		1,499	A	\$ 3.06	38,870			D	
Common	Stock		03/13/2019			M		479	A	\$ 3.06	39,349			D	
Reminder: I	Report on a s	separate line for each	ch class of securitie	es beneficially o	owned d	F	Perso	ns who ined in	this for	m are	he collectio not require	d to respo	nd unless		474 (9-02)
				Derivative Sect		Acquired	l, Dis	posed of,	or Ben	eficiall		ontroi nui	ilber.		
Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, i	4. Transaction Code	5. Num	ber 6. Exp ive (Mo	Date E piratio	xercisable n Date Day/Year)	e and	7. Title Amount Under	nt of lying	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned	Ownersh Form of	,

Security (Instr. 3)	Conversion	Date (Month/Day/Year)	Execution Date, if	Code		of Der Sect Acq (A) Disp of (I	curities quired or spoosed (D) str. 3, 4,		Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$ 0.85	03/13/2019		M			4,060	(1)	09/16/2025	Common Stock	4,060	\$ 0	0	D	
Stock Option (Right to Buy)	\$ 3.06	03/13/2019		M			1,499	<u>(2)</u>	03/13/2027	Common Stock	1,499	\$ 0	1,501	D	
Stock Option (Right to Buy)	\$ 3.06	03/13/2019		M			479	<u>(3)</u>	03/27/2027	Common Stock	479	\$ 0	521	D	

Reporting Owners

D (Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Ames Paul S. C/O SHOTSPOTTER INC. 7979 GATEWAY BLVD, STE. 210 NEWARK, CA 94560			SVP Products and Technology					

Signatures

/s/ Paul S. Ames	03/15/2019
Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Fully vested and exercisable.
- (2) 1/48th of the grant vests monthly for 48 months from March 13, 2017.
- (3) 1/48th of the grant vests monthly for 48 months from March 27, 2017.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.