

OMB APPROVAL	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* <u>9830 Macarthur LLC</u> <hr/> (Last) (First) (Middle) <u>30 N. GOULD STREET, SUITE R</u> <hr/> (Street) <u>SHERIDAN WY 82801</u> <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Aterian, Inc. [ATER]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>05/07/2021</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock (\$0.0001 par value)	05/07/2021		P		2,300	A	\$16.3391 ⁽²⁾	4,974,807	I	By: 9830 Macarthur, LLC ⁽¹⁾

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)					

1. Name and Address of Reporting Person*
9830 Macarthur LLC

 (Last) (First) (Middle)
30 N. GOULD STREET, SUITE R

 (Street)
SHERIDAN WY 82801

 (City) (State) (Zip)

1. Name and Address of Reporting Person*
Nijor Children's Trust UA 1/2/2017

 (Last) (First) (Middle)
30 N. GOULD STREET, SUITE R

 (Street)
SHERIDAN WY 82801

 (City) (State) (Zip)

1. Name and Address of Reporting Person*
Puzovic Jelena

 (Last) (First) (Middle)
30 N. GOULD STREET, SUITE R

 (City) (State) (Zip)

(Street)	SHERIDAN	WY	82801
(City)	(State)	(Zip)	

Explanation of Responses:

1. 9830 Macarthur, LLC ("Macarthur") is a private investment vehicle. Macarthur directly owns the securities reported herein. Nijor Children's Trust UA 1/2/2017 (the "Trust") is the Manager of Macarthur. Jelena Puzovic is the Trustee of the Trust. Each Reporting Person disclaims beneficial ownership of all securities reported herein, except to the extent of their pecuniary interest therein, if any, and this report shall not be deemed an admission that such Reporting Person is the beneficial owner of such securities for purposes of Section 16 of the Securities and Exchange Act of 1934 or for any other purpose.

2. All prices reported herein are exclusive of brokerage commissions.

/s/ Jelena Puzovic, for herself
and as the Trustee of the Trust 05/11/2021
(for itself and as Manager of
Macarthur)

** 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.