FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-------|--|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response | : 0.5 | | | | | | | |

| | Check this box if no longer subject |
|--------|-------------------------------------|
| | to Section 16. Form 4 or Form 5 |
| \cup | 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

| 1. Name and Address of Reporting Person* MOHAJER KEYVAN | | | | 2. Issuer Name and Ticker or Trading Symbol SOUNDHOUND AI, INC. [SOUN] | | | | | | | | | | S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner Officer (give title Other (specify)) | | | | | |
|--|---|----------------------------|---------|--|---|--------------------------------|--|---|---------------------|--|-----------------------|-------------------------|--|---|---|--|--|---------|--|
| (Last) | ` | irst) (Middle) ND AI, INC. | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/03/2023 | | | | | | | | | X Office below | , | EO | Other (: below) | specify | |
| 5400 BETSY ROSS DRIVE | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) SANTA CLARA | NTA CA 95054 | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (Z | 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. | | | | | | | | | ended to | | | | | |
| | | Table | I - No | n-Deriva | tive S | ecui | rities | Acc | uired, | Dis | posed of | f, or | r Ben | efic | ally Ow | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | Execution Date, | | | ate, | 3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr 5) | | | | nd Secu Bene Owne | 5. Amount of Securities Beneficially Owned Following | | m: Direct or rect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Trans | eported ansaction(s) nstr. 3 and 4) | | | |
| Class A Common Stock 08/03/20 | | | | | 023 | | | A | | 600,000 |) ⁽¹⁾ A \$ | | \$0. | 00 1, | 1,450,379 | | D | | |
| | | Tab | le II - | Derivativ (e.g., pu | | | | | | | | | | | | ed | | | |
| 1. Title of Derivative Security (Instr. 3) | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | Secu Acqu (A) o Dispo | vative rities rired r osed) r. 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and | | f g nd 4) | 8. Price of Derivative Security (Instr. 5) | | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | V (A) (D) | | Date Exercisable | | Expiration Date | Title | or Nui of | nber | | | | | |

Explanation of Responses:

1. Represents a grant of restricted stock units under the SoundHound AI, Inc. 2022 Incentive Award Plan. The restricted stock units vest over three years.

Remarks:

/s /Warren Heit, attorney-in-

fact for MOHAJER

KEYVAN

** Signature of Reporting Person Date

08/04/2023

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.