## FORM 4

Check this box if no longer subject to

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

]	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.
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1	ss of Reporting Person E MARIO MAX		2. Issuer Name <b>and</b> Ticker or Trading Symbol Aris Water Solutions, Inc. [ARIS]		tionship of Reporting Person(s) to Issuer all applicable)							
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/01/2025		Director Officer (give title below)	10% Owner Other (specify below)						
9651 KATY FREEWAY SUITE 400			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person								
(Street)					Form filed by More than C	ne Reporting Person						
HOUSTON	TX	77024										
(City)	(State)	(Zip)										
		Table I - Non-Deri	vative Securities Acquired, Disposed of, or Beneficia	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)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(Instr. 4)	
Class A Common Stock	03/01/2025		A		5,901(1)	Α	\$ <mark>0</mark>	55,675	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)	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	Ownership Form: Direct (D)	Beneficial Ownership (Instr. 4)		
						Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

## Explanation of Responses:

1. Represents an annual award of restricted stock units ("RSUs") as compensation for the Reporting Person's duties as a non-employee director of the Issuer. The award of RSUs was granted under the Aris Water Solutions, Inc. 2021 Equity Incentive Plan. Each RSU represents the right to receive one share of the Issuer's Class A common stock. The RSUs will vest on the earliest to occur of: (i) the date of the Issuer's 2026 annual meeting of stockholders if the Reporting Person is not continuing on the Issuer's board of directors or (ii) March 1, 2026. Settlement of all or a portion of the vested RSUs may be deferred by the Reporting Person, in which case, settlement will occur pursuant to the terms of the Reporting Person's applicable deferral election.

/s/ Robert W. Hunt, Jr., as										
Attorney-in-Fact										

Date

\*\* Signature of Reporting Person

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.

03/19/2025