FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| OMB APPROVAL        |          |  |  |  |  |  |  |  |  |  |
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| OMB Number:         | 3235-028 |  |  |  |  |  |  |  |  |  |
| Estimated average b | ourden   |  |  |  |  |  |  |  |  |  |

0.5

hours per response

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

|   |   |  |  |        | -3  |   |  |   |                             |                |      |                |                    |                                |  |   |  |   |  |                                       |  |
|---|---|--|--|--------|---|---|--|---|-----------------------------|----------------|------|----------------|--------------------|--------------------------------|--|---|--|---|--|---------------------------------------|--|
| Name and Address of Reporting Person*     Carolin Roger Anthony |   |  |  |        |   | 2. Issuer Name and Ticker or Trading Symbol AMKOR TECHNOLOGY, INC. [ AMKR ] |  |   |                             |                |      |                |                    |                                |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |   |  |                                       |  |
| Caroni  | <u>r Roger A</u>  | <u> 11111011y</u>                          |  |        | -   | <u> </u>  |  |   |                             |                |      |                |                    | X Directo                      | or                                     |   | 10% Ow   | ner   |  |                                       |  |
|   | BERTY RIE   | irst)<br>DGE DRIVE                         | (Middle)   |        |   | 3. Date of Earliest Transaction (Month/Day/Year) 02/14/2019                 |  |   |                             |                |      |                |                    | Officer<br>below)              | (give title                            |   | Other (s<br>below)   | pecify  |  |                                       |  |
| SUITE 3   | 00  |  |  |        | 4.  | If Ame  | endme  | ent, Date   | of C                        | Driginal F     | iled | (Month/D       | ay/Yea             | ar)                            | 6. Ir                                  | ndividual or  | Joint/Group  | Filing  | (Check App   | licable                               |  |
| (Street)  |   |  |  |        | -   |   |  |   |                             |                |      |                |                    |                                | Line                                   | ,   | ilad bu One  | Dana  | rting Person   |                                       |  |
| WAYNE   | PA  | A  | 19087  |        |   |   |  |   |                             |                |      |                |                    |                                |  | _   | iled by Mor  |   | One Report   | - 1                                   |  |
| (City)  | (S  | tate)                                      | (Zip)  |        |   |   |  |   |                             |                |      |                |                    |                                |  |   |  |   |  |                                       |  |
|   |   | Та   | ble I - No   | n-Deri | ivativ  | ve Se   | ecuri  | ities A   | cqu                         | ıired, I       | Disp | osed           | of, oı             | r Ben                          | eficiall                               | y Owned   |  |   |  |                                       |  |
| 1. Title of Security (Instr. 3)                                 |   | 2. Transaction<br>Date<br>(Month/Day/Year) |  |        | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |   | Code (Instr.   |   |                             |                |      |                |                    | Benefici<br>Owned              | es<br>ally<br>Following                | Form  | : Direct II<br>Indirect E<br>str. 4)   | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership |  |                                       |  |
|   |   |  |  |        |   |   |  |   |                             | Code           | v    | Amount         | t (A) or (D)       |                                | Price                                  | Transac   | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                                       |   |  | (Instr. 4)                            |  |
| Common  | Stock   |  |  | 02/1   | 14/20   | 1/2019  |  |   |                             | M              |      | 20,00          | 00                 | Α                              | \$4.5                                  | 54  | ,176   |   | D  |                                       |  |
| Common  | Stock   |  | 02/14  |        | 14/201  | 19  |  |   |                             | S              |      | 20,00          | 00                 | D                              | \$9.36                                 | 1) 34   | ,176   | D   |  |                                       |  |
| Common Stock  |   |  |  |        |   |   |  |   |                             |                |      |                |                    | 40                             | 10,400                                 |   | I J  | Held<br>Jointly<br>with<br>Spouse                   |  |                                       |  |
|   |   |  | Table II -   |        |   |   |  |   |                             |                |      | sed of         |                    |                                |  | Owned   |  | ,   |  |                                       |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)             | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution D<br>if any<br>(Month/Day/ | ate,   | 4.<br>Transa<br>Code (I<br>8)                               |   | of<br>Deri<br>Secu<br>Acqu<br>(A) o<br>Disp<br>of (D | umber vative urities uired or oosed O) (Instr. and 5) | 6. Date Expiration (Month/D |                | ate  |                | Secur<br>Deriva    |                                |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                     | 9. Number derivative Securitie Beneficia Owned Followin Reported Transact (Instr. 4) | re<br>es<br>ally<br>g                               | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |   |  |  |        | Code  | v   | (A)  | (D)   | Dat<br>Exe                  | e<br>ercisable |      | piration<br>te | Title              |                                | Amount<br>or<br>Number<br>of<br>Shares |   |  |   |  |                                       |  |
| Director<br>Stock<br>Option<br>(Right to                        | \$4.5   | 02/14/2019                                 |  |        | М   |   |  | 20,000  |                             | (2)            | 05.  | /04/2019       | Techn<br>In<br>Com | nkor<br>nology,<br>nc.<br>nmon | 20,000                                 | \$0.00  | 0  |   | D  |                                       |  |

## Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from 9.39 to 9.36.
- 2. These options vest 100% on the earlier of the first anniversary of the grant date, or the date of the first annual meeting of stockholders following the grant date

## Remarks:

<u>Jerry C. Allison, Attorney-in-</u> <u>Fact for Roger A. Carolin</u>

02/19/2019

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.