# FORM 4

Check this box if no longer subject

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden

	16. Form 4 or Form 5 may continue. See 1(b).	Fil	ed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940	Estimated average burden hours per response: 0.5
1. Name and A KIM AG	Address of Reporting	Person*	2. Issuer Name and Ticker or Trading Symbol <u>AMKOR TECHNOLOGY, INC.</u> [ AMKR ] _	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title X Other (specify
	(First) A CARR O'CONN LANCASTER A		3. Date of Earliest Transaction (Month/Day/Year) 02/09/2023	below) A below) Member of 10% owner group (3)
(Street) PAOLI (City)	PA (State)	19301-9713 (Zip)	<ul> <li>4. If Amendment, Date of Original Filed (Month/Day/Year)</li> </ul>	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person

## 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)	ution Date, Transaction Code (Inst					5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(1150. 4)
Common Stock	02/09/2023		G	v	667,225 <sup>(1)</sup>	Α	\$0.00	3,278,001	D	
Common Stock								69,409,857 <sup>(2)</sup>	Ι	By spouse

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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

#### **Explanation of Responses:**

1. On February 9, 2023 the Agnes C. Kim 2020-1 Qualified Annuity Trust U/A dated 12/16/20 distributed 667,225 shares of the Common Stock of Amkor Technology, Inc. to the Reporting Person. 2. The Reporting Person disclaims beneficial ownership of these securities, except to the extent of the Reporting Person's pecuniary interest therein, and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of such securities, except to the extent of the Reporting Person's pecuniary interest therein, for purposes of Section 16 of the Securities Exchange Act of 1934, as amended ("Section 16"), or for any other purpose.

### Remarks:

(3) The Reporting Person states that the filing of this Form 4 shall not be deemed an admission that the Reporting Person is the beneficial owner of the reported securities owned by the other members of the group, for the purpose of Section 16, or for any other purpose.

> Mark N. Rogers, Attorney-in-02/15/2023

Fact for Agnes C. Kim

\*\* 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.