FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington, [	D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated avera	ge burden									
hours per respon	nse: 0.5									

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

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Name and Address of Reporting Person*     Faust Megan						2. Issuer Name and Ticker or Trading Symbol AMKOR TECHNOLOGY, INC. [ AMKR ]									5. Relationship of Reporting Person(s) to Issue (Check all applicable)  Director 10% Own						
(Last) 2045 E I	`	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/09/2024									X Officer below)		Other (below)		(specify		
2045 E INNOVATION CIRCLE						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) TEMPE	A	Z	85284		-									- 1	Y Form f	iled by Mo		orting Person			
(City)	(S	tate)	(Zip)		Rı	Rule 10b5-1(c) Transaction Indication															
											action was ons of Rule				ract, instruction 10.	on or writter	n plan th	hat is intende	d to		
		Tab	le I - Noi	n-Deriv	ative	Sec	curiti	ies Ac	quired	, Dis	posed (	of, or	Ben	eficial	ly Owned	t					
Dat				Date	2. Transaction Date Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Securitie Benefici Owned F	5. Amount of Securities Beneficially Owned Following Reported		r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(	A) or D)	Price	Transaci (Instr. 3	tion(s)			(Instr. 4)			
Common Stock 02/0				02/09	9/2024	/2024		М		1,90	6	A	\$ <mark>0</mark>	37	37,300		D				
Common Stock 02/09				0/2024			F <sup>(1)</sup>		878	878 D S		\$31.2	2 36,422			D					
		Т	able II -	Deriva (e.g., p	tive s	Secu calls	ıritie s, wa	s Acq	uired, s, optic	Disp ns, o	osed of converti	, or E	ecur	icially	Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code ( 8)				6. Date E Expiration (Month/I	n Date	)	Amou Secur Unde Deriv	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	N O	amount or lumber of Shares							
Restricted Stock	\$0	02/09/2024			M			1,906	(2)		(2)	Comr		1,906	\$0	1,906	5	D			

## **Explanation of Responses:**

1. The transaction represents shares withheld by Amkor Technology, Inc. (the "Issuer") in connection with the vesting of certain restricted stock units ("RSUs") granted to the Reporting Person on February 11, 2021 (the "Grant Date") pursuant to the Issuer's Second Amended and Restated 2007 Equity Incentive Plan, as amended, and the related award agreement. These shares were withheld to satisfy the Reporting Person's tax withholding obligations. The Issuer will pay these taxes on behalf of the Reporting Person.

2. On the Grant Date, the Reporting Person was granted 7,625 RSUs which vest in four equal annual installments beginning on the first anniversary of the Grant Date.

## Remarks:

Mark N. Rogers, Attorney-in-Fact for Megan Faust

02/13/2024

\*\* 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.