

# ICHOR HOLDINGS, LTD.

# Reported by **CANTY KEVIN M.**

### FORM 4

(Statement of Changes in Beneficial Ownership)

### Filed 02/21/18 for the Period Ending 02/15/18

Address 3185 LAURELVIEW CT.

FREMONT, CA, 94538

Telephone 510-897-5200

CIK 0001652535

Symbol ICHR

SIC Code 3674 - Semiconductors and Related Devices

Industry Semiconductors

Sector Technology

Fiscal Year 12/27



[] 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

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer				
CANTY KEVIN M.				IC	ICHOR HOLDINGS, LTD. [ ICHR ]							(Check all app	(Check all applicable)				
(Last) (First) (Middle)				3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)							Director					
C/O ICHOR HOLDINGS, LTD., 3185 LAUREL VIEW CT.				5	2/15/2018							"	X Officer (give title below) Other (specify below)  Chief Operating Officer				
(Street)				4. ]	4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
FREMONT,	<b>CA 9453</b> ity) (Sta		)									_ X _ Form filed by		rting Person One Reporting P	erson		
			Гable I - N	lon-Der	ivati	ive Secu	rities A	equire	ed, D	isposed (	of, or Bo	eneficially Own	ed				
1.Title of Security (Instr. 3)			ans. Date	Execu		on (Instr. 8)		de 4. Securities Acqu or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securiti Following Reported T (Instr. 3 and 4)				Ownership of Indire Form: Benefici	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amoi	(A) o	r Price					(Instr. 4)		
	Tabl	le II - Deri	vative Sec	urities l	Bene	ficially (	Owned (	( e.g. ,	, puts	s, calls, w	arrants	s, options, conve	rtible sec	urities)			
1. Title of Derivate Security (Instr. 3)		Date	3A. Deemed Execution Date, if any	4. Trans. 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		Securities	underlying e Security	Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)		
Option (right to buy)	\$24.89	2/15/2018		A		20300		(	1)	2/15/2025	Ordinal Shares		\$0.00	20300	D		
Restricted Stock Unit	\$0.00 (2)	2/15/2018		A		9200		<u>C</u>	<u>2)</u>	<u>(2)</u>	Ordinal Shares		\$0.00	9200	D		

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

- (1) The option vests as follows: 25% of the option vests on February 15, 2019 and the remainder vests ratably on a quarterly basis over a three year period thereafter.
- (2) The restricted stock unit ("RSU") represents a contingent right to receive ordinary shares of Ichor Holdings, Ltd. The RSU vests as follows: 25% of the RSU vests on February 15, 2019 and the remainder vests ratably on a quarterly basis over a three year period thereafter.

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
CANTY KEVIN M.								
C/O ICHOR HOLDINGS, LTD.		Chief Operating Officer						
3185 LAUREL VIEW CT.			Ciliei Operating Officer					
FREMONT, CA 94538								

#### **Signatures**

/s/ Nelda Young by Power of Attorney

\*\*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 control number.