FORM 4	
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\Box 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

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

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 and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issue (Check all applicable)					
Sparks Larry J	ICHOR HOLDINGS, LTD. [ICHR]	Director 10% Owner				
(Last) (First) (Middle)	3. Date of Earliest Transaction (MM/DD/YYYY)	X_Officer (give title below) Other (specify below)				
C/O ICHOR HOLDINGS, LTD., 3185	5/18/2023	Chief Financial Officer				
LAURELVIEW CT						
(Street)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)				
FREMONT, CA 94538		X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)	Rule 10b5-1(c) Transaction Indication					
	□ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plat that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

				-				-		
1. Title of Security	2. Trans. Date	2A. Deemed	3. Trans. Code		4. Securities Acquired (A)		d (A)	5. Amount of Securities Beneficially Owned	6.	7. Nature
(Instr. 3)		Execution	(Instr. 8)		or Disposed of (D)			Following Reported Transaction(s)	Ownership	of Indirect
		Date, if any		(Instr. 3, 4 and 5) ((Instr. 3 and 4)	Form:	Beneficial	
									Direct (D)	Ownership
									or Indirect	(Instr. 4)
						(A) or			(I) (Instr.	
			Code	V	Amount	(D)	Price		4)	
Ordinary Shares, par value \$0.0001	5/18/2023		Α		29535 <u>(1)</u>	Α	\$0	101290	D	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

						•		0.1	-		· • ·		,		
1. Title of Derivate	2.		3A. Deemed					6. Date Exe					9. Number of		11. Nature
Security	Conversion	Date	Execution	(Instr. 8)		Derivative	Securities	and Expirati	ion Date	Secur	ities Underlying	Derivative	derivative	Ownership	of Indirect
(Instr. 3)	or Exercise		Date, if any			Acquired (.	A) or			Deriv	ative Security	Security	Securities	Form of	Beneficial
	Price of		-			Disposed o	f (D)			(Instr	3 and 4)	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					(Instr. 3, 4	and 5)			`	·		Owned	Security:	(Instr. 4)
	Security						,						Following	Direct (D)	
				-									Reported	or Indirect	
								Date	Expiration	Title	Amount or Number of Shares		Transaction(s)	(I) (Instr.	
				Code	V	(A)	(D)	Exercisable	Date	inte	Shares		(Instr. 4)	4)	

Explanation of Responses:

(1) Consists of an RSU grant, representing the right to receive Ordinary Shares of Ichor Holdings, Ltd. The RSU vests as follows: 25% vests on May 18, 2024 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			
Sparks Larry J C/O ICHOR HOLDINGS, LTD. 3185 LAURELVIEW CT FREMONT, CA 94538			Chief Financial Officer				

Signatures

/s/ Chase Rosson by Power of Attorney	5/22/202
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**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 control number.