

# ICHOR HOLDINGS, LTD.

# Reported by **HAUGEN MARC**

### FORM 4

(Statement of Changes in Beneficial Ownership)

### Filed 08/16/18 for the Period Ending 08/15/18

Address 3185 LAURELVIEW CT.

**FREMONT, CA, 94538** 

Telephone 510-897-5200

CIK 0001652535

Symbol ICHR

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

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

Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					ICHOR HOLDINGS, LTD. [ ICHR ]						X Dir	X Director 10% Owner					
(Last)	(First)	) (Mi	ddle)	3	3. Date of Earliest Transaction (MM/DD/YYYY)							Officer (give title below) Other (specify below)				below)	
C/O ICHOR HOLDINGS, LTD., 3185 LAURELVIEW COURT					8/15/2018												
LAUKELVI	(Stre			4	. If A	mendme	ent, Date C	Origin	nal Fil	ed (MM/I	DD/YYYY	6. Individ	lual or	Joint/G	roup Filing	Check Appl	icable Line)
FREMONT, CA 94538 (City) (State) (Zip)												X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		,	Table I	- Non-D	eriva	tive Sec	urities Ac	quire	ed, Di	isposed	of, or B	eneficially (	Owned	i			
1. Title of Security (Instr. 3)			. Trans. Da	Date 2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquire or Disposed of (D) (Instr. 3, 4 and 5)		Ď) `´	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Form:	7. Nature of Indirect Beneficial Ownership		
							Code	V	Amou	(A) or (D)	Price					or Indirect (I) (Instr. 4)	(Instr. 4)
Ordinary Shares, par value \$0.0001 8/15/2013				8/15/2018	8/	15/2018	M		1266	A	\$0.00	1266			D		
	Tabl	e II - Deri	vative S	ecuritie	s Ben	eficially	Owned (	e.g. ,	, puts	, calls, v	varrants	s, options, c	onver	tible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deem Execution Date, if an		8) Derivative Securities (A) or D (D)				<ol><li>Date Exercisable and Expiration Date</li></ol>		Securities	Underlying e Security	Jnderlying Derivative Security Security		9. Number of derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	e V	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares			Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	
Restricted Stock Unit	<u>(1)</u>	8/15/2018	8/15/201	8 M			1266	(	<u>1)</u>	<u>(1)</u>	Ordina Shares	ry 1266		\$0.00	3792	D	

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

(1) 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 August 15, 2018 and the remainder vests ratably on a quarterly basis over a three year period thereafter.

#### **Reporting Owners**

F							
Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Haugen Marc							
C/O ICHOR HOLDINGS, LTD.	X						
3185 LAURELVIEW COURT	Λ						
FREMONT, CA 94538							

### **Signatures**

/s/ Chase Rosson by Power of Attorney	8/16/2018
** 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.