## FORM 4/A

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB	APF	PRO	VAL
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OMB Number:	3235-0287
Estimated average burden hours per response	0.5

. Name and Address of Reporting Person <sup>*</sup> Pallash Robert C			2. Issuer Name <b>and</b> Ticker or Trading Symbol Arcadium Lithium plc [ALTM]		nship of Reporting Person(s) to Issuer k all applicable)	40% Очител	
						10% Owner Other (specify below)	
(Last) C/O SUITE 12, GAT SHANNON AIRPO		(Middle) 3.	3. Date of Earliest Transaction (Month/Day/Year) 03/07/2024				
(Street) SHANNON	L2	V14 E370	4. If Amendment, Date of Original Filed (Month/Day/Year) 03/11/2024	6. Individ X	ual or Joint/Group Filing (Check Applica Form filed by One Reporting Person Form filed by More than One Reporti		
(City)	(State)	(Zip)				g. 5.55	

Table I – Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, Code (Instr. 8) (In if any		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported		7. Nature of Indirect Beneficial				
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		Ownership (Instr. 4)			
Ordinary Shares	03/07/2024		A		14,798 <sup>(1)</sup>	A	(1)	90,743	D				

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)	Conversion Date Execution Date, Code (Instr. 8) or Exercise (Month/Day/Year) if any		Derivative Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5) Derivativ Securitie Beneficia Owned F Reported	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	ve Ownership es Form: Direct ially (D) or Following Indirect (I) ed (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		

#### Explanation of Responses:

1. Reflects the grant of restricted stock units (RSUs) with respect to ordinary shares of the Issuer under the Issuer's Omnibus Incentive Plan (the "Plan"). The RSUs are scheduled to vest in full on the earliest of (i) the first anniversary of the date of grant, (ii) the date of the annual shareholders' meeting that next follows the grant date, or (iii) a change in control, subject to the terms of the Plan and the applicable award agreement issued thereunder.

#### Remarks:

This Amended Form 4 is being filed because the box indicating "no longer subject to Section 16" was inadvertently checked in the Form 4 filed earlier on March 11, 2024. The reporting person continues to be a director of the Issuer and, therefore, continues to be subject to Section 16.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

## /s/ Sara Ponessa, as attorney-in-fact

03/11/2024

Date

\*\* 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 Number.