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## FORM 4

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.

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWN
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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 A	APPROVAL
OMB Number:	3235-0287
Estimated average burden hours per response	0.5

Name and Address of Reporting Person* Heredia Florencia			Issuer Name and Ticker or Trading Symbol     Arcadium Lithium plc [ ALTM ]	(Check all applicable)	Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First)	(Middle)		X Director Officer (give title below)	10% Owner Other (specify below)				
C/O SUITE 12, GA SHANNON AIRPO	ATEWAY HUB	(widule)	Date of Earliest Transaction (Month/Day/Year)     07/24/2024						
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applic	cable Line)				
SHANNON	L2	V14 E370		X Form filed by One Reporting Per Form filed by More than One Re					
(City)	(State)	(Zip)			•				

								I			
Table I – Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, (Instr. 8) 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) 5)			or Disposed Of	(D) (Instr. 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		if any (Month/Day/Year)	Code	٧	Amount	(A) or (D)	Price	and 4)		Ownership (Iristi: 4)	
Ordinary Shares	07/24/2024		F		5,683 <sup>(1)</sup>	D	\$3.45	19,765	D		
Ordinary Shares	07/26/2024		A		40,786 <sup>(2)</sup>	A	(2)	60,551	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)	Derivative		Execution Date,	4. Transacti (Instr. 8)	on Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	V	(A)	(A) (D) Date Expiration Date		Amount or Number of Shares			Transaction(s) (Instr. 4)			

## Explanation of Responses:

- 1. Represents shares withheld by the Issuer to cover tax obligations from the settlement of vested restricted stock units (RSUs).
- 2. Reflects the grant of 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:

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

\*\* Signature of Reporting Person

07/26/2024 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.