FORM 4
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[] 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 <sup>*</sup>	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer					
		(Check all applicable)					
Zhou Rong	Amphastar Pharmaceuticals, Inc. [						
	AMPH ]	Director10% Owner					
(Last) (First) (Middle)	3. Date of Earliest Transaction (MM/DD/YYYY)	X_Officer (give title below) Other (specify below)					
		EVP, Production Center					
C/O AMPHASTAR	3/16/2022						
PHARMACEUTICALS, INC., 11570							
6TH STREET							
(Street)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)					
RANCHO CUCAMONGA, CA 91730 (City) (State) (Zip)		X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					

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

Tuble 1 Tion Dermative Scentifies Required, Disposed on, of Deneneumy Owned										
1. Title of Security (Instr. 3)			3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock	3/16/2022		F		2283 ( <u>1</u> )	D	\$34.22	80030	D	
Common Stock	3/17/2022		F		2447 <sup>(1)</sup>	D	\$34.18	77583	D	
Common Stock								99668	I I	See footnote <sup>(2)</sup>
Common Stock								5000		See footnote <sup>(3)</sup>

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

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1. Title of Derivate	2.	3. Trans.	3A. Deemed	4. Trans. C	Code	5. Number	of	6. Date Exe	cisable	7. Titl	e and Amount of	8. Price of	9. Number of	10.	11. Nature
Security	Conversion	Date	Execution	(Instr. 8)		Derivative	Securities	and Expirati	on Date	Secur	ities Underlying	Derivative	derivative	Ownership	of Indirect
(Instr. 3)	or Exercise		Date, if any			Acquired (A	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 a	and 5)						Owned	Security:	(Instr. 4)
	Security													Direct (D)	
								D /	<b>n</b>				· F · · · · ·	or Indirect	
								Date	Expiration	Title	Amount or Number of Shares		Transaction(s)	(I) (Instr.	
				Code	V	(A)	(D)	Exercisable	Date		Shares		(Instr. 4)	4)	

## **Explanation of Responses:**

- (1) The reported shares were withheld to satisfy the reporting person's tax liability in connection with the vesting of restricted stock units, or RSUs.
- (2) The shares are held of record by the Zhou Family Trust for which the reporting person serves as a trustee.
- (3) The shares are held of record by the reporting person's spouse.

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Zhou Rong C/O AMPHASTAR PHARMACEUTICALS, INC. 11570 6TH STREET RANCHO CUCAMONGA, CA 91730			EVP, Production Center					

#### Signatures

/s/ Eva Wen, by power of attorney	
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\*\*Signature of Reporting Person

3/18/2022 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.