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.

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

Liawatidewi Yakob					2. Issuer Name and Ticker or Trading Symbol							5. Relationshi	5. Relationship of Reporting Person(s) to Issuer				
					1.								(Check all app	(Check all applicable)			
						Amphastar Pharmaceuticals, Inc. [AMPH]							_X_ Director		10	% Owner	
(Last)	(First)	(Mi	3. Date of Earliest Transaction (MM/DD/YYYY)									X_ Officer (give title below) Other (specify below) EVP CORP ADMIN CENTER					
C/O AMPHASTAR					3/15/2024												
PHARMAC		LS, INC	C., 1157	70													
6TH STREE																	
(Street)				4. I	4. If Amendment, Date Original Filed (MM/DD/YYYY)							Y) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
RANCHO CUCAMONGA, CA 91730													X _ Form filed by One Reporting Person				
(City) (State) (Zip)				1							Form filed by	Form filed by More than One Reporting Person					
			Table I	- Non-	-Der	ivati	ve Seci	ırities Ac	qui	red, Dis	posed o	f, or B	Seneficially Owne	ed			
1. Title of Security (Instr. 3)				2A. Deemed Execution Date, if any		3. Trans. Cod (Instr. 8)		4. Securities Acquir or Disposed of (D) (Instr. 3, 4 and 5)			Following Reported Transaction(s) Ownership of		Beneficial Ownership				
								Code	V	Amount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				3/15/202	24			F		1,027	D	\$43.05			78,175	D	
Common Stock 3/2				3/16/202	24			F		1,671 (I	D	\$43.05		76,50		D	
Common Stock 3/17/202				24			F		1,726 (I	D	\$43.05			74,778	D		
Common Stock															2,459	I	See footnote (2)
	Tab	le II - Der	ivative :	Securi	ties]	Bene	ficially	Owned	(e.g.	, puts, c	alls, wa	rrant	s, options, conve	tible secu	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deen Execution Date, if a	ution (Ins		A D		Number of Derivative Securities Acquired (A) or Disposed of (D) Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			and Amount of ies Underlying tive Security 3 and 4)	8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D)	Beneficial
					ode	V	(A)	(D)	Da Ex	te ercisable	Expiration Date		Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 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 reported shares are held of record by the Yakob and Sunmoon Trust dated July 25, 2013 for which the reporting person serves as a trustee.

Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Liawatidewi Yakob C/O AMPHASTAR PHARMACEUTICALS, INC. 11570 6TH STREET RANCHO CUCAMONGA, CA 91730	X		EVP CORP ADMIN CENTER				

Signatures

/s/ Eva Wen, by power of attorney	3/19/2024		
**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.