

[] 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
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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 *				2.	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Gerst Diane G.					Amphastar Pharmaceuticals, Inc. [ AMPH]							X Director 10% Owner				
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							Officer (give title below) Other (specify below)				
C/O AMPHASTAR PHARMACEUTICALS, INC., 11570							7/1	18/2	2022							
PHARMAC 6TH STREE		LS, INC	., 11570													
	(Stre	eet)		4.	If An	nendm	ent, Date	Orig	inal Fil	ed (MM/I	DD/YYYY)	6. Individual o	or Joint/G	roup Filing	Check Appl	icable Line)
RANCHO CUCAMONGA, CA 91730 (City) (State) (Zip)												X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(0	(Su			on-Dei	rivati	ive Sec	curities A	cqui	red, Di	isposed	of, or Ben	eficially Owne	d			
1. Title of Security (Instr. 3)			1	te 2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de	4. Securities Acqui Disposed of (D) (Instr. 3, 4 and 5)		. ,	5. Amount of Securities Beneficially Owner Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount	(A) or (D)	Price				(I) (Instr. 4)	(IIIsti. 4)
Common Stock 7/18/2022				2022			M		1520	A	\$20.08	14362			D	
Common Stock 7/18/2022				2022			$S^{(1)}$		1520	D	837.2346 <sup>(2)</sup>	12842			D	
	Tak	ole II - Deri	ivative Sec	urities	Bene	eficiall	y Owned	(e.g.	, puts,	calls, w	arrants, o	ptions, conver	tible secu	rities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)	Deriva Acquir Dispos				6. Date Exercisable and Expiration Date		7. Title and Securities U Derivative S (Instr. 3 and	Inderlying Security		9. Number of derivative Securities Beneficially Owned	10. Ownership Form of Derivative Security: Direct (D)	Beneficial
	Security			Code	V	(A)	(D)	Dat Exe	e ercisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	or Indirect	
Stock Option (right to buy)	\$20.08	7/18/2022		M			1520		(3)	6/8/2028	Common Stock	1520	\$0	1336	D	

### **Explanation of Responses:**

- (1) The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 13, 2022.
- (2) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$36.925 to \$37.58, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price.
- (3) Shares subject to the option are fully vested and immediately exercisable.

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Gerst Diane G. C/O AMPHASTAR PHARMACEUTICALS, INC.						
11570 6TH STREET	X					
RANCHO CUCAMONGA, CA 91730						

#### **Signatures**

/s/ Eva Wen, by power of attorney

\*\*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.