FORM 4

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington.	D.C.	20549

STATEMENT OF	CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average burden											
hours per response:	0.5										

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     McKechnie Mark					2. Issuer Name and Ticker or Trading Symbol ACM Research, Inc. [ ACMR ]									ck all applica Director	able)	) Perso	on(s) to Issue	ner		
(Last)	`	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/10/2023								officer ( below)	(give title See Remar		Other (specifically below)	pecify		
C/O ACM RESEARCH, INC. 42307 OSGOOD ROAD, SUITE I					4. If Amendment, Date of Original Filed (Month/Day/Year) 08/14/2023							Line)	''							
(Street)	NT C	A	94539										X	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	itate)	(Zip)		_ R	Rule 10b5-1(c) Transaction Indication  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.														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/L				action 2A. Deemed Execution Date if any (Month/Day/Yea		e, Transaction Dispos Code (Instr.		4. Securi Disposed	urities Acquired (A) o sed Of (D) (Instr. 3, 4		A) or 3, 4 and 5)	5. Amoun Securities Beneficial Owned Fo	s Form ally (D) or ollowing (I) (In		Direct Indirect Estr. 4)	. Nature of ndirect seneficial ownership nstr. 4)				
							С	ode \	v	Amount	t (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)						
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
		Transa Code (I	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)			curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)						
				Co	Code	v	(A)	(D)	Date Exerc	cisable		cpiration ate	Title	or Nu	mount ımber Shares		(Instr. 4)			
Stock Option	\$13.89 <sup>(1)</sup>	08/10/2023			A			300,000		(2)	08	3/09/2033	Class A Commo Stock	n 30	00,000	\$0	300,00	00	D	

## **Explanation of Responses:**

- 1. This Form 4 amendment has been filed solely to correct the exercise price of the stock option to purchase shares of Class A Common Stock of the Issuer reported in a Form 4 filed on August 14, 2023 (the "Form 4"). The exercise price was inadvertently stated as \$13.24 in the Form 4. The exercise price should have been stated as \$13.89 in the Form 4.
- 2. The option will vest and become exercisable as to 75,000 shares on August 10, 2024 and the remaining 225,000 shares will vest and become exercisable in equal monthly installments over the following 36 months, subject to continued service through each vesting date.

## Remarks:

Chief Financial Officer and Treasurer

08/21/2023 /s/ Mark McKechnie

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.