FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours nor roomones	. 0.5							

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 for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

defense	e conditions of ee Instruction 1	Rule 10b5-																	
Name and Address of Reporting Person* Heredia Florencia				2. Issuer Name and Ticker or Trading Symbol Arcadium Lithium plc [ALTM]								(CI	Relationshi neck all app	,		rson(s) to I			
	· · · · · ·	TEWAY HUB	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/06/2025										Officer (give title below)		Other (sbelow)	specify	
SHANNON AIRPORT HOUSE				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SHANN	NON L2 V14 E370													Form	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	Zip)																
		Table	l - Nor	n-Deriva	tive S	ecur	ities	Acq	uired,	Disp	osed of	, or	Ben	efici	ally Owr	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr and 5)				d (A) oi r. 3, 4	Securi Benefi Owned Follow	5. Amount of Securities Beneficially Owned Following		: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A (C	A) or D)	Price	Report Transa (Instr.	action(s) . 3 and 4)			
Ordinary Shares 03/06/2					025			D		19,765		D	(1)		0		D		
Ordinary	Ordinary Shares 03/06/2				2025				D		40,786	5 D		(2)		0	D		
		Tab		Derivativ (e.g., pu												d			
1. Title of Derivative Security (Instr. 3)			ion Date,	4. Transaction Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) o Dispo of (D (Instrand &	vative crities cired r osed)	6. Date Expiration (Month/D	n Dai		Amount of Securities Underlying Derivative Security (Instr. 3 and description)		ount	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y 0	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Represents shares of common stock of Aracdium Lithium plc ("Arcadium") disposed of pursuant to the Transaction Agreement, dated October 9, 2024, by and among Arcadium, Rio Tinto Western Holdings Limited ("Parent") and Rio Tinto BM Subsidiary Limited ("Buyers") (the "Transaction Agreement"). Pursuant to the Transaction Agreement, at the effective time of the transaction contemplated thereby (the "Effective Time"), each share of Arcadium common stock held by the reporting person was converted automatically into the right to receive \$5.85 per share in cash (the "Consideration").

Exercisable

2. Pursuant to the Transaction Agreement, at the Effective Time, each award of Arcadium restricted stock units held by the reporting person was canceled in exchange for the right to receive the Consideration in respect of each share of Arcadium common stock subject to such restricted stock unit award as of immediately prior to the Effective Time.

(A) (D)

/s/ Sara Ponessa, as attorneyin-fact

Shares

03/06/2025

** 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 Number.