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.

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.

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 37 1 4 1	1 CD	D	*	12	Icen	er Name	and Ticke	er or	Tradi	na Symb	nol .	5 Relationshi	n of Reno	orting Person	n(e) to Iee	uer
1. Name and Address of Reporting Person *-					1334	ci ivanic	and Ticke	CI ()I	Haai	ng Symo	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Ribeyrolle C	hristian .	Antoine	Lucien	L .		ONIEF [RYA]	R ADVA M]	NC	ED	MATE	RIALS	`	,	10%	6 Owner	
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							X_ Officer (give title below) Other (specify below) SVP, Biomaterials				
1301 RIVER BOULEVAR		E 2300					3/1	/20	24							
DOCEE VIII	(Stre			4.	If A	mendmer	nt, Date O	rigin	nal Fil	ed (MM/D	D/YYYY)	6. Individual o	or Joint/G	roup Filing	(Check Appl	licable Line)
JACKSONV	TLLE, F	L 32207										X Form filed by		rting Person One Reporting I)	
(C	City) (Sta	ate) (Zip	p)									Form filed by	More than C	one Reporting i	rerson	
			Table I -	- Non-De	riva	tive Secu	rities Acc	quire	ed, Di	sposed o	of, or Be	neficially Owne	d			
1. Title of Security (Instr. 3) 2. Trans. I		Trans. Date	2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		or Disposed of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) Instr. 3 and 4)			Ownership of Indirect Form: Beneficia Direct (D) Ownershi	Beneficial Ownership			
							Code	v	Amou	(A) o	r Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				3/1/2024			M		2,8	81 A	\$0			14,945	D	
	Tab	ole II - Der	ivative S	Securities	Ben	neficially	Owned (e.g.,	puts,	calls, wa	arrants,	options, conver	tible secu	urities)		
Security	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deeme Execution Date, if an		5. Number Derivative Acquired (Disposed of (Instr. 3, 4		Securities and (A) or of (D)		Oate Exercisable Expiration Date			Inderlying Derivativ Security Security		9. Number of derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	V	(A)	(D)	Date Exer	: cisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect	
Restricted Stock Units	(1)	3/1/2024		М			2,881	3/1/	/2024	3/1/2024	Commo Stock	n 2,881	\$0	0	D	
Restricted Stock Units	(1)	3/1/2024		A		8,572		3/1/	/2027	3/1/2027	Commo Stock	n 8,572	\$0	8,572	D	

Explanation of Responses:

(1) Each restricted stock unit represents a contingent right to receive one share of RYAM common stock.

Reporting Owners

Panarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Ribeyrolle Christian Antoine Lucien							
1301 RIVERPLACE BOULEVARD			CVD Diamatanials				
SUITE 2300			SVP, Biomaterials				
JACKSONVILLE, FL 32207							

Signatures

Brenda K. Davis, Attorney-in-Fact

3/5/2024

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.