

[] 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

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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. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Posze James L Jr					RAYONIER ADVANCED							Ì	Director 10% Owner				
(Last) (First) (Middle)					MATERIALS INC. [ RYAM ]  3. Date of Earliest Transaction (MM/DD/YYYY)						s	X Officer (give title below) Other (specify below)  SVP, Human Resources					
1301 RIVERPLACE						1/2/2015											
BOULEVARD, SUITE 2300 (Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							YY) 6	6. Individual or Joint/Group Filing (Check Applicable Line)				
JACKSONVILLE, FL 32207 (City) (State) (Zip)												-	_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
			Table I -	Non-D	erivati	ive Secu	rities A	cqu	ired, Dis	posed o	of, or	Benef	icially Own	ed			
1. Title of Security (Instr. 3)  2. Trans. Date (Instr. 3)				ns. Date	2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquire Disposed of (D) (Instr. 3, 4 and 5)			Fol	Amount of Securion Reported str. 3 and 4)	ities Beneficially Owned Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial Ownership
							Code	V	Amount	(A) or (D)	Pric	ce					(Instr. 4)
Common Stock 1/2/2015				/2015			A		10000.00	)0 A	\$0.000	00	17879.0000		D		
Common Stock 1/2/2015				/2015			A		4658.000 (2)	) A	\$0.000	00	22537.0000		D		
Common Stock													382.2631		I	By 401k (3)	
	Tabl	le II - Der	ivative Se	curities	s Bene	ficially	Owned	( e.g	z., puts,	calls, w	arrai	nts, op	tions, conve	rtible sec	curities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Tran (Instr. 8	Acqui Dispo				6. Date Exercisable and Expiration Date			tle and A rities Unc vative Se :. 3 and 4	derlying curity	8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	e V	(A)	(D)		Date Expira Date		Title	Amoun	at or Number of		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

## **Explanation of Responses:**

- (1) Restricted stock award granted under the Rayonier Advanced Materials Inc. Incentive Stock Plan. This award will vest and become payable on 1/2/2019, subject to the reporting persons continued employment with the Issuer.
- (2) Restricted stock award granted under the Rayonier Advanced Materials Inc. Incentive Stock Plan. This award will vest and become payable on 1/2/2018, subject to the reporting persons continued employment with the Issuer.
- (3) Shares are held in the Rayonier Advanced Materials Investment and Savings Plan, a 401(k) plan, for this person's account.

**Reporting Owners** 

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Posze James L Jr								
1301 RIVERPLACE BOULEVARD		SVP, Human Res						
SUITE 2300			5 v 1 , 11 aman Resources					
JACKSONVILLE, FL 32207								

## Signatures

Brenda K. Davis, Attorney-in-Fact

\*\* Signature of Reporting Person

Date

- \* 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.