

[] 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

| Name and Address of Reporting Person *         |                                                                       |                   |                                        |                | 2. Issuer Name and Ticker or Trading Symbol                                                        |               |           |                                                                                   |        |                                                                                     | bol                                                               | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |                                                                   |                                                       |                                                                    |              |
|------------------------------------------------|-----------------------------------------------------------------------|-------------------|----------------------------------------|----------------|----------------------------------------------------------------------------------------------------|---------------|-----------|-----------------------------------------------------------------------------------|--------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------|--------------|
| Garcia Gabricia                                |                                                                       |                   |                                        |                | RAYONIER ADVANCED<br>MATERIALS INC. [ RYAM ]                                                       |               |           |                                                                                   |        |                                                                                     |                                                                   | Director                                                                |                                                                   | 10%                                                   | Owner                                                              |              |
| (Last                                          | t) (Fir                                                               | st) (M            | Middle)                                | 3.             | Dat                                                                                                | te of Earlie  | st Trans  | action                                                                            | (MM    | /DD/YYY                                                                             | Y)                                                                | X_ Officer (gi                                                          |                                                                   |                                                       | her (specify l                                                     | below)       |
| 1301 RIVEI<br>BOULEVA                          |                                                                       |                   | )                                      |                |                                                                                                    |               | 3/        | 1/202                                                                             | 22     |                                                                                     |                                                                   |                                                                         |                                                                   |                                                       |                                                                    |              |
|                                                | (St                                                                   | reet)             |                                        | 4.             | If A                                                                                               | Amendmen      | t, Date ( | Origina                                                                           | al Fil | ed (MM/I                                                                            | OD/YYYY)                                                          | 6. Individual                                                           | or Joint/G                                                        | roup Filing (                                         | (Check Appl                                                        | icable 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-De       | eriva                                                                                              | ative Secur   | rities Ac | equire                                                                            | d, Di  | isposed                                                                             | of, or Ben                                                        | eficially Own                                                           | ed                                                                |                                                       |                                                                    |              |
| 1.Title of Security (Instr. 3)  2. Trans. I    |                                                                       |                   |                                        | 2. Trans. Date | Execution (Instr. 8) or Disposed of (D) Fol                                                        |               |           | llowing Reported Transaction(s) str. 3 and 4)  Ownership Form: Ben Direct (D) Own |        |                                                                                     | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                                                         |                                                                   |                                                       |                                                                    |              |
|                                                | Ta                                                                    | ıble II - De      | erivative                              | Securities     | s Be                                                                                               | eneficially ( | Owned     | ( <i>e.g.</i> , p                                                                 | outs,  | calls, w                                                                            | arrants, o                                                        | options, conve                                                          | tible secu                                                        | ırities)                                              |                                                                    |              |
| 1. Title of Derivate<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Trans.<br>Date | 3A. Deeme<br>Execution<br>Date, if any |                | 5. Number of<br>Derivative Securities<br>Acquired (A) or<br>Disposed of (D)<br>(Instr. 3, 4 and 5) |               | or<br>D)  | 6. Date Exercisable and Expiration Date                                           |        | 7. Title and<br>Securities U<br>Derivative S<br>(Instr. 3 and                       | nderlying<br>Security                                             |                                                                         | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned | Ownership of Form of Derivative Security: (In         | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |              |
|                                                |                                                                       |                   |                                        | Code           | V                                                                                                  | (A)           | (D)       | Date<br>Exercisa                                                                  |        | Expiration<br>Date                                                                  | Title                                                             | Amount or<br>Number of<br>Shares                                        |                                                                   | Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | Direct (D)<br>or Indirect<br>(I) (Instr.<br>4)                     |              |
| Restricted Stock<br>Units                      | (1)                                                                   | 3/1/2022          |                                        | A              |                                                                                                    | 8681.0000     |           | 3/1/202                                                                           | 25     | 3/1/2025                                                                            | Common<br>Stock                                                   | 8681.0000                                                               | \$0.0000                                                          | 8681.0000                                             | D                                                                  |              |

#### **Explanation of Responses:**

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

### **Reporting Owners**

| Reporting Owner Name / Address                                                       | Relationships |           |                               |       |  |  |  |
|--------------------------------------------------------------------------------------|---------------|-----------|-------------------------------|-------|--|--|--|
| Reporting Owner Name / Address                                                       | Director      | 10% Owner | Officer                       | Other |  |  |  |
| Garcia Gabriela<br>1301 RIVERPLACE BOULEVARD<br>SUITE 2300<br>JACKSONVILLE, FL 32207 |               |           | CAO, VP, Corporate Controller |       |  |  |  |

#### **Signatures**

| Brenda K. Davis, Attorney-in-Fact | 3/3/2022 |
|-----------------------------------|----------|
| **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.