FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

| 1. Name and Address of Reporting Person * <u>LUDWIG MICHAEL M</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol AMTECH SYSTEMS INC [ASYS] | | | | | | | | S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|---|--|------------|--------------|--------------------|--|---------|--|--------------------|--|--------------------|---|---|--|--|---------------------------------------|--|------------|--|
| (Last) | (First) | , | /liddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 01/13/2023 | | | | | | | | Officer (give title below) | | | Other (specify below) | | |
| C/O AMTECH SYSTEMS, INC. 131 S. CLARK DRIVE | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| (Street) TEMPE | AZ | 8 | 5288 | | | | | | | | | | Form file | d by More t | than O | ne Reportin | g Person | |
| (City) | (State | | zble I - Nor | 2-Doriv | ntivo S | ocuriti | ne Acc | nuired [|)ien | osad of | or Benefi | cially Ov | mad | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date | | | | 2. Transa Date | vative Securities Acc saction ZA. Deemed Execution Date, if any (Month/Day/Year) | | 3. 4. Securitie Disposed Code (Instr. | | | ties Acquired (A | A) or | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transactio (Instr. 3 and | | | | (Instr. 4) | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | Code | saction (Instr. | 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) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported | lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | | |
| | | | | Code | v | (A) | (D) | Date Exercisabl | | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | | | |
| Restricted Stock Units | (1) | 01/13/2023 | | A | | 3,000 | | 03/01/2023 | 3(2) | (2) | Amtech Systems, Inc. \$0.01 par value common stock | 3,000 | \$0.00 | 3,000 | | D | | |

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of Common Stock of Amtech Systems, Inc.
- 2. The restricted stock units will vest on the date of the Company's 2023 Annual Meeting of Shareholders.

Remarks:

/s/ Lisa D. Gibbs on behalf of Michael M. Ludwig by Power of 01/18/2023 Attorney

** 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.