FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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* Beck Eileen L (Last) (First) (Middle) 4350 CONGRESS STREET					2. <u>G</u>	2. Issuer Name and Ticker or Trading Symbol Glatfelter Corp [GLT]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director					
					3. Date of Earliest Transaction (Month/Day/Year) 02/17/2024									below)	(give title Global Hu	ıman	Other (s below) Resources	`	
SUITE 600						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	OTTE N	C	28209											X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	state)	(Zip)		R	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satis									o satisfy				
											ule 10b5-1(c)			ot, motraction	or writteri pr		i io interioca t	o suddry	
		Та	ble I - Noi	n-Der	ivativ	ve S	ecuriti	es Ac	quired	l, Dis	posed of	, or Ben	eficially	Owned					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. r) 8) 4. Securities Ac Disposed Of (D)				Beneficially Owned Following				7. Nature of Indirect Beneficial Ownership				
									Code	V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock, Par Value \$.01 02/				02/	17/20	7/2024		M		6,273 A \$		\$2.19	36,976			D			
Common Stock, Par Value \$.01			02/	17/20	7/2024			F		2,123(1) D	\$2.19	34,853			D			
			Table II -								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any Code (Instr. 8) Code (Instr. 8) Acquired or Did of (D		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			ion Dat			f g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Transaction(s (Instr. 4)				
Restricted Stock Units	(2)	02/17/2024			Α		416 ⁽³⁾		02/17/2	024 ⁽⁴⁾	02/17/2024	Common Stock, Par Value \$.01	416	(5)	6,273		D		
Restricted Stock Units	(2)	02/17/2024			М			6,273	02/17/2	024 ⁽⁴⁾	02/17/2024	Common Stock, Par Value	6,273	\$0	0		D		

Explanation of Responses:

- 1. These shares are being withheld to satisfy tax obligations.
- 2. Not applicable to this transaction. RSUs have no value until all restrictions lapse on the final vesting date.
- 3. These are dividend equivalents in the form of additional Restricted Stock Units ("RSUs") that have accrued on the 2/17/2021 SET RSU Grant reported previously. The dividend equivalents are added to the initial grant at the time of payout.
- 4. This grant vests in full, and all restrictions lapse, three years from the Grant Date.
- 5. Not applicable to this transaction.

/s/ Jill L. Urey, Attorney-in-fact 02/20/2024

** 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.