FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

		00540
Vashington,	D.C.	20549

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

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

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* Lee Hau L.					2. Issuer Name and Ticker or Trading Symbol Silvaco Group, Inc. [SVCO]									ck all app	nship of Reporting P I applicable) Director		son(s) to Is 10% Ov		
(Last)	(Fir	st) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 07/11/2024									Office below	er (give title /)		Other (s below)	specify	
C/O SILVACO GROUP, INC 4701 PATRICK HENRY DRIVE, BUILDING #				NG #23	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc Line)		dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person					
(Street) SANTA CLARA	CA	. 9	5054		Rul	Form filed by More than One Reporting Person Rule 10b5-1(c) Transaction Indication											orting		
(City)	(Sta	ate) (2	Zip)			Check this box to indicate 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.													
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3enef	ficiall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Executi ay/Year) if any		Deemed cution Date, y hth/Day/Year)		Transaction Disposed (Code (Instr. 5)		ies Acquired (A) Of (D) (Instr. 3, 4			5. Amo Securit Benefic Owned Report	ies cially Following	Form: (D) or	Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(A) or (D) Pr		Price	Transaction(s) (Instr. 3 and 4)				(IIISU. 4)				
Common Stock 07/11					/2024			A		7,858 ⁽¹⁾		A	\$ <mark>0</mark>	21,296			D		
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	Date, Transactio Code (Inst			mber rative rities ired r osed) : 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Se (Ir	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Numb of Share	ber					

Explanation of Responses:

1. These shares represent an award of restricted stock units (RSUs) granted on July 11, 2024 (the Grant Date) under the Issuer's 2024 Stock Incentive Plan. Such award shall vest in full on the earlier of (i) June 30, 2025; (ii) the next annual meeting of the shareholders after the date hereof; and (iii) the consummation of a Change in Control (as defined in the Plan), subject to the Reporting Person's continuous service relationship with the Issuer through such date. Each RSU represents a contingent right to receive one share of the Issuer's Common Stock.

Remarks:

/s/ Thomas Yih, by Power of <u>Attorney</u>

07/12/2024

** 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.