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Kim Theodor Form 4	re S										
March 12, 20)19										
FORM	4									PPROVAL	
	UNITEL) STATES		hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1 Section 17(a) of the Public Utility Holding Company Act of 1935 or S 30(h) of the Investment Company Act of 1940						ge Act of 1934, f 1935 or Sectio	Expires: January 31 2005 Estimated average burden hours per response 0.5 n				
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> Kim Theodore S			2. Issuer Name and Ticker or Trading Symbol MAGNACHIP SEMICONDUCTOR Corp [MX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 60 SOUTH SUITE 750	3. Date of Earliest Transaction(Month/Day/Year)03/08/2019					Director 10% Owner X Officer (give title Other (specify below) below) See Remarks					
				ndment, Dat th/Day/Year)	-			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ities Acc	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any	emed on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial (Indirect (I) Ownership (Instr. 4) (Instr. 4)		
Common Stock	03/08/2019			A	4,044 (1)	(D) A	\$ 0	75,237	D		
Common Stock	03/08/2019			F	1,674 (2)	D	\$ 7.51	73,563	D		
Common Stock	03/11/2019			F	1,863 (3)	D	\$ 7.52	71,700	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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displays a currently valid OMB control number.

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Kim Theodore S 60 SOUTH MARKET STREET, SUITE 750 SAN JOSE, CA 95113			See Remarks			
Signatures						

/s/ Theodore 03/12/2019 Kim ____*Signature of Date

Explanation of Responses:

- * 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).
- (1) This transaction reflects shares of common stock issued in connection with the vesting of AOP performance-based restricted stock units granted on October 22, 2018.

This transaction represents the withholding by the Issuer of 1,674 shares of common stock to satisfy tax withholding obligations incurred(2) by the Reporting Person upon the vesting of 4,044 shares of common stock issued in connection with the vesting of AOP performance-based restricted stock units granted on October 22, 2018.

This transaction represents the withholding by the Issuer of 1,863 shares of common stock to satisfy tax withholding obligations incurred

(3) by the Reporting Person upon the vesting of 4,500 shares of common stock originally awarded to the Reporting Person on March 11, 2016.

Remarks:

Chief Compliance Officer, Executive Vice President and General Counsel

Reporting Person

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Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.