(Street) **NEW YORK**

(City)

NY

(State)

Brigade Capital Management GP, LLC

1. Name and Address of Reporting $\mathsf{Person}^{^\star}$

10022

(Zip)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE

ES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 0.5

Check this box if no longer subject to

obligat لـــــ	ions may continition 1(b).			File							ies Exchanç mpany Act			4				esponse:	0.5
1. Name and Address of Reporting Person* BRIGADE CAPITAL MANAGEMENT, LP				2. Issuer Name and Ticker or Trading Symbol MAGNACHIP SEMICONDUCTOR Corp [MX]										ck all app Dired Offic	olicable) ctor er (give title	X 10% ve title Other		Owner er (specify	
(Last) (First) (Middle) 399 PARK AVENUE 16TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 01/09/2019										below) below)					
(Street) NEW YORK NY 10022				If Amendment, Date of Original Filed (Month/Day/Year)									Line)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
(City)	(St		Zip)		<u> </u>						•			<u> </u>		•			
Date			2. Transa	ction	2A. Deemed		ed Date,	3. Transa Code (ction	4. Securities Acquired (A) on Disposed Of (D) (Instr. 3, 4 a		A) or	5. Amo Securit Benefic Owned	Amount of curities neficially when Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Common Stock, par value \$.01 per share 0:		01/09/	/2019				P		30,000		A	\$6.82	3,6	3,657,935		Ι	See footnote ⁽¹⁾	
		Та									osed of, onvertib				Owned			,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. Transaction Code (Instr. 8)		n of		6. Date Exerci Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	Price of erivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amo or Num of Sha						
		Reporting Person*	GEME	ENT, L	<u>P</u>														
(Last) 399 PAR 16TH FI	K AVENUE	(First)	(Mid	ldle)		_													
(Street) NEW Y	ORK	NY	100	22		_													
(City) (State) (Zip)																			
		Reporting Person* [ALD E III																	
	GADE CAI	(First) PITAL MANAG E, 16TH FLOOF		-															

(Last)	(First)	(Middle)					
399 PARK AVENUE							
16TH FLOOR							
(Street) NEW YORK	NY	10022					
(City)	(State)	(Zip)					

Explanation of Responses:

1. The reported securities are directly owned by private fund clients of Brigade Capital Management, LP, The reported securities may be deemed beneficially owned by Brigade Capital Management, LP, the investment manager of such private fund clients, Brigade Capital Management GP, LLC, the general partner of Brigade Capital Management, LP, and Donald E. Morgan, III, the managing member of Brigade Capital Management GP, LLC, each a Reporting Person. Brigade Capital Management, LP, Brigade Capital Management GP, LLC and Mr. Morgan each disclaim beneficial ownership of the reported securities except to the extent of their pecuniary interest therein, and this report shall not be deemed to be an admission that each Reporting Person is the beneficial owner of the securities for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

Brigade Capital Management,

LP, /s/ Donald E. Morgan, III,

<u>Managing Member of its</u> <u>General Partner</u>

/s/ Donald E. Morgan, III 01/10/2019

Brigade Capital Management

GP, LLC, /s/ Donald E.

Morgan, III, Managing

Member

** Signature of Reporting Person

01/10/2019

01/10/2019

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.