SEC Form	n 4																			
FORM 4 UNITE				ITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549													OMB APPROVAL			
Section 16. Form 4 or Form 5 obligations may continue. See					ed pur	AT OF CHANGES IN BENEFICIAL OWNER ad pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
1. Name and Address of Reporting Person [*] <u>Kim Young-Joon</u> (Last) (First) (Middle) C/O MAGNACHIP SEMICONDUCTOR, LTD.,					2. 1 <u>M</u> M2 3. [2. Issuer Name and Ticker or Trading Symbol MAGNACHIP SEMICONDUCTOR Corp [MX] 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2024									elationship of Reporting Person(s) to Issuer eck all applicable) ☑ Director 10% Owner ☑ Officer (give title below) See Remarks				wner	
108, YEOUI-DAERO, YEONGDEUNGPO-GU (Street) SEOUL M5 07335					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Ag Line) Image: Check Age of the state of the											ting Persor	ı		
(City) (State) (Zip)						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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	ole I - Nor	n-Deri	vativ	e Se	curities	Aco	quired,	Dis	posed of	f, or Be	ene	ficially	Owned					
1. Title of Security (Instr. 3) 2. Trans Date (Month/I					ear) i	A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			and 5) Securities Beneficial Owned Fo Reported		Form	nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	(A) (D)	or	Price	Transaction(s) (Instr. 3 and 4)				. ,	
Common Stock 06/01					1/202	/2024			Α		133,000 A		\$0.00	657,	57,923		D			
		-	Table II -								osed of, onvertib				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transa Code (8)				6. Date Exercis Expiration Date (Month/Day/Ye		te	7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		s ecurity	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact	re es ally g d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	le V (/	(A)	(D)	Date Exercisa		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)				
Performance- Based Restricted Stock Units	(1)	06/01/2024			A		267,000		(2)		01/31/2027	Commo Stock	n 2	267,000	\$0.00	267,0	00	D		

Explanation of Responses:

1. Each Performance-Based Restricted Stock Unit ("PRSU") represents a contingent right to receive one share of Issuer's common stock.

2. Reflects a number of shares of Issuer common stock that the Reporting Person would receive upon vesting and settlement of the PRSUs at the target level of performance, provided that the actual number of PRSUs that would become eligible to vest ranges from 0% to 300% of the target number of PRSUs, based on actual achievement. The PRSUs vest upon Issuer's common stock achieving a specified price per share.

Remarks:

Director and Chief Executive Officer

/s/ Theodore Kim, Attorney-in-Fact 06/13/2024

** 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.