

OMB APPROVAL	
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**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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* <u>LASRY MARC</u>  (Last) (First) (Middle) <u>C/O AVENUE CAPITAL MANAGEMENT II, L.P.</u> <u>399 PARK AVENUE, 6TH FLOOR</u>  (Street) <u>NEW YORK NY 10022</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>MAGNACHIP SEMICONDUCTOR Corp [ MX ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>08/15/2017</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year) <u>08/17/2017</u>	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially 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. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

**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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person\*  
LASRY MARC  
 (Last) (First) (Middle)  
C/O AVENUE CAPITAL MANAGEMENT II, L.P.  
399 PARK AVENUE, 6TH FLOOR  
 (Street)  
NEW YORK NY 10022  
 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
Avenue International Master, L.P.  
 (Last) (First) (Middle)  
C/O AVENUE CAPITAL MANAGEMENT II, L.P.  
399 PARK AVENUE, 6TH FLOOR  
 (Street)  
NEW YORK NY 10022  
 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
AVENUE INTERNATIONAL, LTD.  
 (Last) (First) (Middle)  
C/O AVENUE CAPITAL MANAGEMENT II, L.P.  
399 PARK AVENUE, 6TH FLOOR  
 (Street)  
NEW YORK NY 10022  
 (City) (State) (Zip)

(Street)  
NEW YORK NY 10022

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(City) (State) (Zip)

1. Name and Address of Reporting Person\*  
[Avenue International Master GenPar, Ltd.](#)

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(Last) (First) (Middle)  
C/O AVENUE CAPITAL MANAGEMENT II, L.P.  
399 PARK AVENUE, 6TH FLOOR

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(Street)  
NEW YORK NY 10022

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(City) (State) (Zip)

1. Name and Address of Reporting Person\*  
[Avenue Partners, LLC](#)

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(Last) (First) (Middle)  
C/O AVENUE CAPITAL MANAGEMENT II, L.P.  
399 PARK AVENUE, 6TH FLOOR

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(Street)  
NEW YORK NY 10022

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(City) (State) (Zip)

1. Name and Address of Reporting Person\*  
[Avenue Capital Management II, L.P.](#)

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(Last) (First) (Middle)  
399 PARK AVENUE, 6TH FLOOR

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(Street)  
NEW YORK NY 10022

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(City) (State) (Zip)

1. Name and Address of Reporting Person\*  
[Avenue Capital Management II GenPar, LLC](#)

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(Last) (First) (Middle)  
399 PARK AVENUE, 6TH FLOOR

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(Street)  
NEW YORK NY 10022

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(City) (State) (Zip)

**Explanation of Responses:**

**Remarks:**

This Form 4 amendment is being filed solely to remove the sentence under "Remarks" that was included in the Form 4 filed by the reporting persons on August 17, 2017.

[Avenue International Master, L.P. By: Avenue International Master GenPar, Ltd., its General Partner, By: /s/ Eric Ross, attorney-in-fact for Marc Lasry, Director](#) 08/17/2017

[Avenue International, Ltd., By: /s/ Eric Ross, attorney-in-fact for Marc Lasry, Director](#) 08/17/2017

[Avenue International Master GenPar, Ltd., By: /s/ Eric Ross, attorney-in-fact for Marc Lasry, Director](#) 08/17/2017

[Avenue Partners, LLC, By: /s/ Eric Ross, attorney-in-fact for Marc Lasry, Managing Member](#) 08/17/2017

Avenue Capital Management  
II, L.P., By: Avenue Capital  
Management II GenPar, LLC,  
its General Partner, By: /s/ Eric  
Ross, attorney-in-fact for Marc  
Lasry, Managing Member 08/17/2017

Avenue Capital Management  
II, GenPar, LLC, By: /s/ Eric  
Ross, attorney-in-fact for Marc  
Lasry, Managing Member 08/17/2017

/s/ Eric Ross, attorney-in-fact  
for Marc Lasry. 08/17/2017

\*\* 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.**