

Jankowsky Jeff
 Form 3/A
 February 14, 2019

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Jankowsky Jeff		(Month/Day/Year)	TTM TECHNOLOGIES INC [TTMI]	
(Last)	(First)	(Middle)	12/31/2018	
1665 SCENIC AVENUE, SUITE 250			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	01/07/2019
COSTA MESA, CA 92626			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Form filed by One Reporting Person
			(give title below) (specify below)	<input type="checkbox"/> Form filed by More than One Reporting Person
			President, C&C BU	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	13,851 ⁽¹⁾ ⁽²⁾	D	

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

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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Date Exercisable	Expiration Date	Amount or Number of Shares	or Indirect (I) (Instr. 5)
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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Jankowsky Jeff 1665 SCENIC AVENUE SUITE 250 COSTA MESA, CA 92626	^	^	^ President, C&C BU	^

Signatures

By Daniel J. Weber,
Attorney-in-Fact

02/14/2019

Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) The number of shares beneficially owned was incorrectly reported on the reporting person's original Form 3. Includes (i) 5,502 shares held directly by the Reporting Person, (ii) 1,506 restricted stock units granted on 3/2/2016 that will vest on 3/2/2019; (iii) 2,078 restricted stock units granted on 3/1/2017 that will vest one-half on 3/1/2019 and one-half on 3/1/2020; (iv) 746 restricted stock units granted on 11/6/2017 that will vest one-half on 11/6/2019 and one-half on 11/6/2020; and (v) 4,019 restricted stock units granted on 3/29/2018 that will vest one-third on the first, second, and third anniversaries of the date of grant. Each restricted stock unit represents the contingent right to receive one share of the Issuer's common stock. Upon vesting, the stock underlying the restricted units will be delivered on or within 30 days of the vesting date.

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.