FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
l	OMB Number:	3235-0287							
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l	hours per response:	0.5							

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	Secti	on 30(h) d	of the	Investmen	t Cor	npany Act	of 1940								
Name and Address of Reporting Person* Murphy Michael T.						2. Issuer Name and Ticker or Trading Symbol M/A-COM Technology Solutions Holdings, Inc. [MTSI]									5. Relationship of Repo (Check all applicable) Director X Officer (give til			10% Ov	vner	
(Last) (First) (Middle) 100 CHELMSFORD STREET						3. Date of Earliest Transaction (Month/Day/Year) 11/13/2015									SVP, Engineering					
(Street) LOWELL MA 01851					- 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																				
		Tab	le I - Non	-Deriv	/ativ	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	nefici	ally	Owned					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			Transaction Disposed Code (Instr. 5)			ties Acquired (A) or d Of (D) (Instr. 3, 4 an			5. Amour Securitie Beneficia Owned F Reported	s ally ollowing	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A) o (D)	r Pric	e	Transact (Instr. 3 a	tion(s)			,	
Common Stock 11/13/							2015		A		5,155	5,155 ⁽¹⁾ A		\$ <mark>0</mark>	55,940			D		
	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) (Month/Day/Year) 3. Transaction Execution Date, if any (Month/Day/Year) (Month/Day/Year) 4. Transaction Execution Date, if any (Month/Day/Year)		action of			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			. 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)				
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amou or Numb of Share	er						
Employee Stock Option (Right to	\$32.1	11/13/2015			A		10,000		(2)	1	1/12/2022	Common Stock	10,00	00	\$0	10,00	0	D		

Explanation of Responses:

- 1. Represents restricted stock units granted to the Reporting Person under the Issuer's 2012 Omnibus Incentive Plan. Each restricted stock unit represents the contingent right to receive one share of the Issuer's common stock. The restricted stock units vest in four equal annual installments on May 15, 2017, May 15, 2018, May 15, 2019 and May 15, 2020, provided that the Reporting Person remains in continuous service with the Issuer through each vesting date.
- 2. The stock option vests upon achievement of a 30-day trailing average stock price based performance metric during the term of the stock option.

Remarks:

/s/ Clay Simpson, Attorney-in-Fact

11/17/2015

** 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.