FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	<b>OWNERSHIP</b>

OMB Number:	3235-0287
Estimated average burd	len
hours per response:	0.5

OMB APPROVAL

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>Croteau John</u>					<u>M</u> /	2. Issuer Name and Ticker or Trading Symbol  MACOM Technology Solutions Holdings, Inc. [ MTSI ]								Relationship of Reporting F (Check all applicable)     X Director			g Person(s) to I 10% (	
(Last) (First) (Middle) C/O MACOM TECHNOLOGY SOLUTIONS HOLDINGS					3. Date of Earliest Transaction (Month/Day/Year) 09/01/2017								X		Officer (give title below)  President and CEO			
100 CHELMSFORD STREET  (Street)  LOWELL MA 01851  (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or B	enefic	ially	Owne	ed		
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4)						6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A) o (D)	r Price		Transa	action(s) 3 and 4)		(11150: 4)
Common Stock 09/01/20			2017	)17		S <sup>(1)</sup>		2,000	D	\$45	.68 <sup>(2)</sup>	48,855		D				
Common Stock												47,914		I	By trust <sup>(3)</sup>			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Execution Date, T Security or Exercise (Month/Day/Year) if any C			4. Transa Code (I 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Secu (Inst		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	code V (A) (D)		Date Exercis	able	Expiration Date	Title	of Shares						

## **Explanation of Responses:**

- 1. The shares were sold pursuant to a sales plan adopted by the Reporting Person and intended to comply with Rule 10b5-1 under the Securities Exchange Act of 1934.
- 2. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$45.53 to \$45.87. The Reporting Person undertakes to provide to the Issuer, any shareholder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. The shares are held in a trust for the benefit of the Reporting Person's spouse, of which the Reporting Person is a trustee. The Reporting Person disclaims beneficial ownership of such shares except to the extent of his pecuniary interest, if any, therein.

## Remarks:

/s/ Clay Simpson, Attorney-in-Fact 09/06/2017

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.