FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington.	$D \subset$	20540	
wasiiiiuloii.	D.C.	20049	

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 1005-

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL											
OMB Number: 3235-02											
Estimated average burden											
hours per response: 0.											
1	0.										

1(c). S	ee Instruction 1	0.																		
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol MACOM Technology Solutions Holdings,								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
RIBAR GEOFFREY G					Inc. [MTSI]							-8 <u>-</u> 9-	1	Director			10% Ov	vner		
(Last)	(Fir	est) (I	Middle)	1	. L									Office below	er (give title v)		Other (s below)	specify	
l ` ′	`	HNOLOGY SO		,		3. Date of Earliest Transaction (Month/Day/Year)														
HOLDINGS				02/12/2025																
100 CHELMSFORD STREET				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable								
(Street)														Line)	Form	filed by One	o Don	ortina Porce	n	
LOWEL	L M.	A 0	1851											V		filed by Mo		•	- 1	
															Perso		io aia	iii Olio rtopt	Jruing	
(City)	(St	ate) (Ž	Zip)																	
		Table	I - N	on-Deriva	tive S	Secui	rities	Ac	quire	d, Dis	sposed of	f, or E	Benefic	cially	Own	ed				
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/N				Execution (fear)		ion Da	on Date,		3. Transaction Code (Instr. 8) 4. Securities Ad Disposed Of (D				and 5) Securi Benefi Owned		cially d Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Tra		orted nsaction(s) tr. 3 and 4)			(Instr. 4)		
Common	Stock			02/12/20	25						6,656	D	D \$121		14,031			D		
		Tal	ble II	e.g., pu							osed of, convertib				Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if any	Deemed ution Date, y th/Day/Year)		Transaction of Code (Instr. Derivative			Expiration Date (Month/Day/Year) Amount of Securities Underlyin Derivative Security (3 and 4)			int of rities rlying ative rity (Instr	Der Sec (Ins	Price of ivative curity str. 5)	rative derivative rity Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$121.37 to \$122.12. 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.

/s/ Ambra R. Roth, Attorney-in-Fact

02/14/2025

anth.

** Signature of Reporting Person Date

Signature of Reporting Fer

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.