FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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>Daly Stephen G</u>					MA	2. Issuer Name and Ticker or Trading Symbol MACOM Technology Solutions Holdings, Inc. [MTSI]									elationship ck all app Direc	licable)	g Person(s) to Issuer		
(Last) C/O MA HOLDIN		st) (N	Middle)	ONS	3. Da		arliest	Trans	saction (Month/Day/Year)						Office below	,	Other (specification) t and CEO		specify
(Street)	ELMSFORI L M		1851		4. If A	Amendi	ment,	Date o	e of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(Sta	ate) (Z	Zip)			Person Person													
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or E	Benef	iciall	ly Own	ed			
Date				2. Transact Date (Month/Day	Execution (/Year)		ution Date,		3. Transaction Code (Instr. 8)		4. Securities Disposed O 5)	s Acqui f (D) (Ir	ired (A) nstr. 3,	or 4 and	5. Amo Securit Benefic Owned Report	ties cially I Following	Form	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount	(A) (D)	or Pi	ice	Transa	action(s) 3 and 4)			(111501. 4)			
Common Stock 11/05/20					020				A		50,000(1)	A		\$ <mark>0</mark>	258,020			D	
Common	mmon Stock 11/05/20					020			A		37,912(2)	(2) A		\$ <mark>0</mark>	0 295,932			D	
Common	Common Stock 11/05/2				2020				F		38,989(3)	D \$41		41.43	.43 256,943		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)	if any	emed tion Date, n/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 (Inst 3 and 4)		De Se (In	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

- 1. Represents performance-based restricted stock units ("PRSUs") granted to the Reporting Person on May 31, 2019 under the Issuer's 2012 Omnibus Incentive Plan, which vested and settled in shares of Common Stock on November 5, 2020.
- 2. Represents PRSUs granted to the Reporting Person on October 29, 2019 under the Issuer's 2012 Omnibus Incentive Plan, which vested and settled in shares of Common Stock on November 5, 2020.
- 3. Shares withheld by the Issuer to satisfy the Reporting Person's tax withholding obligations in connection with the vesting and settling of PRSUs on November 5, 2020.

Remarks:

/s/ Ambra R. Roth, Attorney-

11/06/2020

in-Fact

** 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.