FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 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

Name and Address of Reporting Person* Croteau John					<u>M</u> /	2. Issuer Name and Ticker or Trading Symbol M/A-COM Technology Solutions Holdings, Inc. [MTSI]								(Cł	eck all a Dir	nip of Reportin oplicable) ector icer (give title	g Person(s) to Is 10% C Other	
(Last) (First) (Middle) 100 CHELMSFORD STREET				3. Date of Earliest Transaction (Month/Day/Year) 10/01/2012									A bel	ow) Pres	below sident			
(Street) LOWELI (City))1851 		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. I Lin	e) <mark>X</mark> Fo Fo	idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Ac Disposed Of (D			es Acc Of (D)	es Acquired (A) or Of (D) (Instr. 3, 4 an		5. Amount of Securities Beneficially Owned Followin Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
										v	Amount	(A) or (D)		Price	Tran	saction(s) r. 3 and 4)		(Instr. 4)
Common Stock 10/01/				/2012	2012		A		62,633 ⁽¹⁾⁽²⁾ A		\$0		62,633	D				
Common Stock 10/01/			/2012	2012		A		95,906 ⁽¹⁾⁽³⁾ A		\$0	158,539		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)	rivative Conversion Date Execution or Exercise (Month/Day/Year) if any		n Date,	Code (Instr.		n of l		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			3. Price o Derivative Security Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber				

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
- 2. The restricted stock units vest as follows: (i) 23,487 restricted stock units vest on February 15, 2013, (ii) 23,487 restricted stock units vest on February 15, 2014 and (iii) 15,659 restricted stock units vest on February 15, 2015, provided that the reporting person remains in continuous service with the issuer through each vesting date.
- 3. The restricted stock units vest as follows: (i) 18,222 restricted stock units vest on May 15, 2013, (ii) 31,104 restricted stock units vest on May 15, 2014, (iii) 31,104 restricted stock units vest on May 15, 2015 and (iii) 15,476 restricted stock units vest on May 15, 2016, provided that the reporting person remains in continuous service with the issuer through each vesting date.

/s/ Clay Simpson, Attorney-in-**Fact**

10/03/2012

** 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.