FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	iuc. See		Filed							es Exchang npany Act o		of 1934		nours	s per re	esponse:	0.5
1. Name and Address of Reporting Person* BLAND CHARLES R				2. Issuer Name and Ticker or Trading Symbol MACOM Technology Solutions Holdings, Inc. [MTSI]									Check all app	lationship of Reporting Person(s) to ck all applicable) Director 10% (Issuer Owner	
(Last)										Offic belo	er (give title w)		Other (sbelow)	specify				
C/O MACOM TECHNOLOGY SOLUTIONS HOLDINGS					3. Date of Earliest Transaction (Month/Day/Year) 11/20/2020													
100 CHELMSFORD STREET				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	L M.	A 0	1851											X Forn	Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(St	ate) (2	Zip)															
		Table	I - Nor	n-Deriva	tive S	Secui	rities	Acq	uired,	Disp	osed of	, or E	Benefic	ially Owr	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date		Date,	3. Transaction Code (Instr. 8)					and Securi Benef Owner	Securities For Beneficially (D)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) (D)	or Price	Transa				(111301. 4)		
Common Stock 11/20/					/2020		S		2,000	D S		13 3	39,996		D			
		Tal									osed of, o			lly Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, 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 Expiration Date (Month/Day/Year)		te	7. Titl Amou Secur Under Derive Secur 3 and	int of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

Remarks:

/s/ Ambra R. Roth, Attorneyin-Fact

11/24/2020

** 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.