FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
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OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	ee Instruction																				
1. Name and Address of Reporting Person* OCAMPO SUSAN						2. Issuer Name and Ticker or Trading Symbol MACOM Technology Solutions Holdings, Inc. [MTSI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (specify						
(Last) (First) (Middle) C/O MACOM TECHNOLOGY SOLUTIONS HOLDINGS						3. Date of Earliest Transaction (Month/Day/Year) 06/24/2025									belov		•	below			
100 CHELMSFORD STREET					4. If A	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)	L M	A 0	01851											Line)	Form	filed by Me		oorting Per an One Re	- 1		
(City)	(St	rate) (2	Zip)																		
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	or B	ene	ficial	ly Own	ed					
Date				Date	ite E onth/Day/Year) if			2A. Deemed Execution Date, if any (Month/Day/Year)		ction Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				nd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o	PI PI	rice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common Stock				06/24/2025				G ⁽¹⁾		200,000	D	,	\$0 ⁽¹⁾	4,615,33		I		By Ocampo Family Trust ⁽²⁾			
Common Stock															4,118,621		I		By trusts for children ⁽²⁾		
Common Stock															1,500,000		I		By GRAT ⁽²⁾		
Common Stock														1,623		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 Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/D					5. Number of		6. Date Expiral (Month	tion D		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Str.	Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	i illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)				
	Code V (A)		(D)	Date Exercis	sable	Expiration Date Title Number of Shares															

Explanation of Responses:

- 1. Represents a bona fide gift of shares to a charitable donor-advised fund in which the Reporting Person has no pecuniary interest.
- 2. The Reporting Person is a trustee of the Ocampo Family Trust, the GRAT and each of the following six trusts for the benefit of her children: (i) two trusts for her son; (ii) two trusts for her daughter; and
- 3. 1,124,543 of such shares are held by two trusts for the Reporting Person's son; 1,497,039 of such shares are held by two trusts for the Reporting Person's daughter; and 1,497,039 of such shares are held by two trusts for the Reporting Person's son.

/s/ Ambra R. Roth, Attorneyin-Fact

06/26/2025

** 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.