SEC Form 4	
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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	1
obligations may continue. See Instruction 1(b).	

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

OMB APPRC	VAL
OMB Number:	3235-0287
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1. Name and Address of Reporting Person [*] OCAMPO JOHN L			2. Issuer Name and Ticker or Trading Symbol <u>M/A-COM Technology Solutions Holdings</u> ,	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
			Inc. [MTSI]	X	Director	Х	10% Owner		
(Last)	(First)	(Middle)			Officer (give title below)		Other (specify below)		
100 CHELMS	FORD STREE	Т	3. Date of Earliest Transaction (Month/Day/Year) 02/20/2013	Chairman					
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Grou	p Filing	(Check Applicable		
LOWELL	MA	01851			Form filed by Or		0		
(City)	(State)	(Zip)		X	Form filed by Mo Person	ore than	One Reporting		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	02/20/2013		s		1,637	D	\$16.67	1,421,413	I	By GaAs Labs, LLC ⁽¹⁾
Common Stock	02/20/2013		s		295	D	\$16.7	1,421,118	I	By GaAs Labs, LLC ⁽¹⁾
Common Stock	02/22/2013		s		500	D	\$16.6	1,420,618	I	By GaAs Labs, LLC ⁽¹⁾
Common Stock								13,025,500	I	By Ocampo Family Trust - 2001 ⁽¹⁾
Common Stock								3,540,000	I	By trust for son ⁽¹⁾
Common Stock								3,540,000	I	By trust for daughter ⁽¹⁾
Common Stock								3,540,000	I	By trust for son ⁽¹⁾

 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of Derivative (A) or Disposed of (D) (Instr. 3, 4 and 5) 6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year)		Expiration Date Amount of (Month/Day/Year) Securities		Amount of Derivative Securities Security Inderlying Oerivative Security (Instr. 5) Security (Instr. 3)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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	Amount or Number of Shares				
1. Name ar	nd Address of	Reporting Person [*]													

OCAMPO JOHN L

(Last)	(First)	(Middle)					
100 CHELMSFORD STREET							
(Street)							
LOWELL	MA	01851					

(City)	(State)	(Zip)
1. Name and Address o OCAMPO SUS		
(Last) 100 CHELMSFOR	(First) D STREET	(Middle)
(Street) LOWELL	MA	01851
(City)	(State)	(Zip)

Explanation of Responses:

1. John and Susan Ocampo are co-trustees of each of the Ocampo Family Trust - 2001 and the trusts for the benefit of their children (collectively, the "Ocampo Family Trusts"). The Ocampo Family Trusts are the members, and John Ocampo is the manager, of GaAs Labs, LLC.

/s/ Clay Simpson, Attorney-in-
Fact02/22/2013** Signature of Reporting PersonDate

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.