| SEC Form 4 | |
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Instruction 1(b).

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 Number: | 3235-0287 | | |
| | Estimated average bur | rden | | |
| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 | hours per response: | 0.5 | | |
| or Section 30(h) of the Investment Company Act of 1940 | | | | |

| | | | | or Sec | ction 30(h) of the In | vestmer | nt Con | npany Act of | 1940 | | | | |
|------------------------------------------------------------------------------------------------|---------|---------------------------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------------------------------------|---------|---------------|---------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------|-------------------------|---------------------------------------------------------|
| 1. Name and Address of Reporting Person [*] OCAMPO SUSAN | | | MA | uer Name and Ticke <u>COM Techno</u> [MTSI] | | | | | ationship of Reporti k all applicable) Director | • | s) to Issuer 0% Owner | | |
| (Last) (First) (Middle) C/O MACOM TECHNOLOGY SOLUTIONS HOLDINGS 100 CHELMSFORD STREET | | | | | e of Earliest Transa)/2023 | ction (N | lonth/ | Day/Year) | | Officer (give title below) | | Other (specify elow) | |
| | | | | | mendment, Date of 2/2023 | Origina | I Filed | l (Month/Day/ | 6. Indi Line) X | | | | |
| (Street) | | | | | | e than one Reporting | | | | | | | |
| LOWELL | MA | 01851 | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | |
| (City) | (State) | (Zip) | | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | is intended to |
| | T | able I - Nor | n-Deriva | tive S | ecurities Acq | uired, | Disp | posed of, | or Ber | neficially | / Owned | | |
| Date | | 2. Transac Date (Month/Da | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownersl Form: Dire (D) or Indir g (I) (Instr. 4) | ect of Indirect rect Beneficial) Ownership | | |
| | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | C | | | | | | | | | | 8,111,661 ⁽¹⁾ | I | By Ocampo Family Trust- 2001 ⁽²⁾ |
| | | | | | curities Acqui | | | • | | | Owned | | |
| | | | | | | | | | | | | | |

| 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. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5 | rative rities ired r osed) c. 3, 4 | 6. Date Exerc Expiration Da (Month/Day/Y | 7. Titl Amou Secur Under Deriv 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(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 | | | | |

Explanation of Responses:

1. Due to an inadvertent clearer error, the Form 4 filed by the Reporting Person on November 16, 2023 over-stated the number of shares of Common Stock held by the Ocampo Family Trust - 2001 following a sale of shares of Common Stock on November 14, 2023 by 381,379 shares, and this error was carried forward in subsequent transactions reported on that Form 4 and on the Form 4 filed by the Reporting Person on November 22, 2023. As reported in this amendment to the Form 4 filed on November 22, 2023, following a sale of shares of Common Stock on November 20, 2023 the Ocampo Family Trust - 2001 held 8,111,661 shares of Common Stock.

2. The Reporting Person is a trustee of the Ocampo Family Trust - 2001.

/s/ Ambra R. Roth, Attorneyin-Fact for Susan Ocampo

01/05/2024

** 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.