## 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
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL							
OMB Number:	3235-0287							
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

1. Name and Address of Reporting Person*  Murphy Michael T.  (Leath Circle) (Middle)						2. Issuer Name and Ticker or Trading Symbol  M/A-COM Technology Solutions Holdings,  Inc. [ MTSI ]										ationship of Reporting k all applicable) Director Officer (give title below)		son(s) to Iss 10% Ov Other (s below)	vner	
(Last) (First) (Middle) 100 CHELMSFORD STREET						3. Date of Earliest Transaction (Month/Day/Year) 05/05/2014										SVP, Engineering				
(Street) LOWELL MA 01851					_   4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X						
(City)	(S	tate)	(Zip)												Persor	1				
1 Tido of 6	Saarreiter (Ince		le I - No	on-Deri		_			quired	, Dis	sposed o	-		ially			6.00	vnership	7. Nature	
Date						Exe	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			id 5)	Securition Benefici	5. Amount of Securities Beneficially Owned Following		n: Direct r Indirect istr. 4)	of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 05/0.				05/05	/2014	014			M		2,600	A	\$0.	.64	53,687			D		
Common	Stock			05/05	/2014				S <sup>(1)</sup>		2,600	D	\$17.	36 <sup>(2)</sup>	51	,087	D			
		7	able II								oosed of converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/E		4. Transa Code ( 8)		on of		6. Date E Expiratio (Month/D	n Dat		nd 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		Di Si (li	. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	sable	Expiration Date	Title	Amount or Number of Shares	er						
Employee Stock Option (Right to	\$0.64	05/05/2014			M			2,600	(3)		11/10/2019	Common Stock	2,60	0	\$0	14,680		D		

## **Explanation of Responses:**

- 1. The shares were sold pursuant to a sales plan adopted by the reporting person and intended to comply with Rule 10b5-1 under the Securities Exchange Act of 1934.
- 2. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$17.20 to \$17.51, inclusive. The reporting person undertakes to provide to the issuer, any shareholder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth
- 3. Represents 150,000 stock options originally granted to the reporting person on November 10, 2009. One-fifth (1/5th) of the stock options vested and became exercisable on November 2, 2010 and one-sixtieth (1/60th) of the stock options vest monthly thereafter provided that the reporting person remains in continuous services with the issuer as of each vesting date.

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

05/07/2014

\*\* 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.