FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Ty	pe Response	s)																	
Name and Address of Reporting Person* Kwong Connie H.					2. Issuer Name and Ticker or Trading Symbol MAXLINEAR INC [MXL]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
(Last) (First) (Middle) C/O MAXLINEAR, INC., 5966 LA PLACE COURT, SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 09/05/2019								X Officer (give title below) Other (specify below) Corporate Controller & PAO						
(Street) CARLSBAD, CA 92008				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City)	(State)		(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3)			Date		Execut any		(Instr. 8)		tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Ownership Form:	Beneficial		
					(Month/Day/Year)		Coo	de	V	Amount	(A) or (D)	Pric	ce	(Instr. 3	and 4)			Ownership (Instr. 4)	
Common	Stock		09/05	/2019				S			2,500	D	\$ 20.74 (1)	489	12,573			D	
Reminder:	Report on a s	separate line	for each	class of secu	Deriva	ative Se	curi	ties Ac	equire	Per con the	sons whatained in form dis	no res n this splays	form s a cu Benefi	are irren	not requ tly valid		ormation pond unle rol numbe	ss	1474 (9-02)
	2. 3. Transact Conversion or Exercise Price of Derivative Security		Execution D any		4. Transaction Code Year) (Instr. 8)		5. Number		6. I	ons, convertible secur Date Exercisable Care Expiration Date Month/Day/Year)		e :	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct (1 or Indire	(Instr. 4)	
						Code	V	(A)	(D)	Dat Exc		Expira Date	ation	Title	Amount or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Kwong Connie H. C/O MAXLINEAR, INC. 5966 LA PLACE COURT, SUITE 100 CARLSBAD, CA 92008			Corporate Controller & PAO					

Signatures

/s/ Connie Kwong	09/06/2019
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- Represents the weighted average share price of an aggregate total of 2,500 shares sold in the price range of \$20.743 to \$20.761 by the reporting person. The reporting person (1) undertakes to provide upon request by the Commission staff, the issuer or a security holder of the issuer, full information regarding the number of shares sold at each separate price.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.