## FORM 4

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

OMB APPROVAL
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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)																
1. Name and Address of Reporting Person *- LITCHFIELD STEVEN G					2. Issuer Name and Ticker or Trading Symbol MAXLINEAR INC [MXL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner				
0/0 1 / / 777 D / D D 70					3. Date of Earliest Transaction (Month/Day/Year) 09/03/2021							)		X Officer (give title below) Other (specify below)  See remarks				
,				4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting Person					
	(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired								d, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	Execution any		, if	Code (Instr. 8)		ion	4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)					ally Owned Transaction	y Owned Following ransaction(s)		7. Nature of Indirect Beneficial
				(Month/	(Month/Day/Year)		Cod	le	V	Amount	(A) or (D)	Price		Instr. 3	and 4)		\ /	Ownership (Instr. 4)
Common	Stock		09/03/2021				P <sup>(1</sup>	J		2,302	A	\$ 54.25 (2)	543	107,40	7		D	
Common	Stock		09/07/2021				P <sup>(1</sup>	)		2,282	A	\$ 54.73 (3)	334	109,689	9		D	
Reminder:	Report on a s	separate line	for each class of sec						Per con the	sons wha	no res n this splay	form a	are n rrentl	ot requ ly valid		ormation spond unle rol numbe	ss	1474 (9-02)
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date Execution Date Of Vative State Sta		d 4 Date, if T	te, if Code (Instr. 8) Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. I and (M	6. Date Exercisable and Expiration Date (Month/Day/Year)  7. An Un Sec (In 4)		J. Title Amour Jnderl Securit Instr.	Owned Following Reported Transaction (Instr. 4)  Amount or		Ownersl Form of Derivati Security Direct (I or Indire	Beneficia Ownersh (Instr. 4)				
					Code	v	(A)	(D)		-	Date	Т	C	Number of Shares				

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LITCHFIELD STEVEN G C/O MAXLINEAR, INC. 5966 LA PLACE COURT, SUITE 100 CARLSBAD, CA 92008			See remarks				

### **Signatures**

/s/ Connie Kwong, as Attorney-in-Fact	09/07/2021	

**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).
- (1) The purchases reported were effected pursuant to a Rule 10b5-1 trading plan adopted on August 2, 2021 by the Reporting Person.
- Represents the weighted average share price of an aggregate total of 2,302 shares purchased in the price range of \$54.00 to \$54.65 by the Reporting Person. The Reporting
- (2) Person 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 purchased at each separate price.
- Represents the weighted average share price of an aggregate total of 2,282 shares purchased in the price range of \$54.46 to \$54.92 by the Reporting Person. The Reporting
- (3) Person 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 purchased at each separate price.

#### Remarks:

Chief Financial Officer and Chief Corporate Strategy Officer

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.