## FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
nours per response	e 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	es)														
1. Name and Address of Reporting Person *- LaChance Michael J.				2. Issuer Name and Ticker or Trading Symbol MAXLINEAR INC [MXL]							5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
2051 PALOMAR AIRPORT ROAD, SUITE 100				3. Date of Earliest Transaction (Month/Day/Year) 11/04/2011								X Officer (give title below) Other (specify below)  Vice President, Operations				
(Street)				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					
CARLSBAD, CA 92011											Form filed by More than One Reporting Person					
(Cit	y)	(State)	(Zip)			Tal	ole I -	Non-Der	ivati	ve Securities	Acquire	d, Dispose	d of, or Ben	eficially Owi	ıed	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		ate, if (	Code Instr.		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		of (D) Ov Tr (Ir	Owned Following Rep Transaction(s) (Instr. 3 and 4)		ng Reported C F I C		. Nature f Indirect Beneficial Ownership Instr. 4)	
							Cod	le V	Amo	ount (D)	Price			(	Instr. 4)	
Reminder:	Report on a	separate line for eac	ch class of securitie	es benefic	cially	owned	directl	<u>-</u>	-							
								conta	inec		m are no	t require	d to respo	nd unless tl		174 (9-02)
								torm	aisp	lays a curr	entiy va	іа ОМВ с	ontrol nur	nber.		
										d of, or Bene ertible secur		wned				
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	f Transaction of Code Der (Instr. 8) Sec Acq (A) Disp (D) (Instr. 8)		of Deriva Securit Acquir (A) or Dispos (D)	Expiration (Month/I urities uired or possed of tr. 3, 4,		Exercisable and on Date Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownershi Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)
				Code	v v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$ 5.45	11/04/2011		A		30,00	0	(1)	]	11/04/2018	Class A Commo Stock (par value \$0.000	n 30,000	\$ 0	30,000	D	
Repor	rting O	wners			•											
Report	ting Owner	Name / Address		Relationships												
		Owner Officer					-	Other								
	e Michael . LOMAR A	J. .IRPORT ROAD			<b>x</b> 7.	n : 1		· ·								

## **Signatures**

CARLSBAD, CA 92011

SUITE 100

/s/ Patrick E. McCready, as Attorney-in-Fact	11/07/2011
**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).
- Subject to the Reporting Person's continuining to be a service provider (as defined in the 2010 Equity Incentive Plan) through each such date, twenty five percent (25%) of the shars (1) subject to the option shall vest and become exercisable on the one (1) year anniversary of November 4, 2011, and one forty-eighth of the shares subject to the option shall vest each month thereafter, such that the option shall become fully vested and exercisable on the November 4, 2015.

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.

Vice President, Operations