# FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0	287				
Estimated average burden						
nours per response						

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 * Spice Adam C.				2. Issuer Name and Ticker or Trading Symbol MAXLINEAR INC [MXL]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O MAXLINEAR, INC., 5966 LA PLACE COURT, SUITE 100			C.T.	3. Date of Earliest Transaction (Month/Day/Year) 05/13/2016						X Officer (give title below) Other (specify below)  VP, Chief Financial Officer					
(Street) CARLSBAD, CA 92008				4. If Amendment, Date Original Filed(Month/Day/Year)					)	6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City	)	(State)	(Zip)	)	Tab	le I - Non-	Deri	vative Se	ecurities	Acqui	red, Disp	osed of, or	Beneficially	Owned	
1.Title of Security (Instr. 3)  2. Transactic Date (Month/Day)		ay/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	f Code (A (D)		(A) or D (D)	(A) or Disposed of		d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
						Code	V	Amount	(A) or t (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Class A C value \$0.0	Common St 0001)	tock (par	05/13/201	16		A		5,653 (1)	A S	\$ 0	256,248			D	
Class A C value \$0.	Common St 0001)	tock (par	05/13/201	16		F		2,124	D S	\$ 18.41	254,124			D	
Reminder: indirectly.	Report on a	separate line f	or each class	s of secur	rities beneficially o	wned direc	tly o	r							
							cont	ained ir	n this fo	rm ar	e not req	uired to re	nformation espond uni ntrol numb	less	EC 1474 (9- 02)
			Tab		erivative Securitie g., puts, calls, wan										
Derivative Conversion Date			eate Execution Month/Day/Year) Execution any		te, if Transaction Code (Code) (Instr. 8)	5. Number of and Expiration D Derivative (Month/Day/Yea Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		on Date	Ame Und Secu	itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownershi Form of Derivativ Security: Direct (D or Indirect	Ownership (Instr. 4)	
					Code V	(A) (D)	Date Exe		Expiratio Date	n Title	Amount or Number of Shares				
Repor	ting O	wners													
_		<b>N</b> Y (			Rel	ationships									

D (1 0 )	Daniel Community (Addison	Relationships						
	Reporting Owner Name / Address		10% Owner	Officer	Other			
C/O 596	ee Adam C. MAXLINEAR, INC. 6 LA PLACE COURT, SUITE 100 RLSBAD, CA 92008			VP, Chief Financial Officer				

### **Signatures**

Adam C. Spice	05/16/2016
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 shares of Class A Common Stock issued to the reporting person for the 2015 performance period under the Company's Executive Incentive Bonus Plan (the "Bonus Plan"). All shares were issued pursuant to the Company's 2010 Equity Incentive Plan. Grant amounts were determined based on the award amount earned under

the Bonus Plan and the closing price of the Company's Class A Common Stock in trading on the New York Stock Exchange on May 13, 2016.

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.