FORM 4

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

OMB APPROVAL						
DMB Number:	3235-0287					
Estimated average burden						
ours per respons	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)															
Name and Address of Reporting Person * SEENDRIPU KISHORE				2. Issuer Name and Ticker or Trading Symbol MAXLINEAR INC [MXL]								5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_ Officer (give title below)				
(Last) (First) (Middle) C/O MAXLINEAR, INC., 5966 LA PLACE COURT, SUITE 100				3. Date of Earliest Transaction (Month/Day/Year) 05/13/2016													
(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 Form filed by More than One Reporting Person					
CARLSBAD, CA 92008											_	Tomi med by viole diam one reporting reason					
(City)	1	(State)	(Zip)		Tal	ble I -	- Non-I	Deriv	vative S	ecuritie	es Aco	quir	ed, Dispo	sed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)		tion	on 4. Securities Acqui (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially		ly Owned Following Γransaction(s)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
					C	Code	V	Amour	(A) or (D)	Pric	ce			or Indir (I) (Instr. 4		(Instr. 4)	
Class A C value \$0.0	Common St 1001)	tock (par	05/13/2016				A		13,31 ['] (1)	7 A	\$ 0	1	150,203			D	
	Class A Common Stock (par value \$0.0001) 05/13/2016		05/13/2016			F			5,004	D	\$ 18.4	41	145,199			D	
Reminder: I	Report on a	separate line fo	or each class of secu	ırities	beneficially of	owne	d direct	tly or	r								
Persons who respond to the collection of information SEC 1474 (9- contained in this form are not required to respond unless 02) the form displays a currently valid OMB control number.										,							
					tive Securiti uts, calls, wa								y Owned				
1. Title of	2.	3. Transaction			4.		ımber	6. Da	ate Exer	cisable	7	7. Tit	le and	8. Price of	9. Number	of 10.	11. Nature
	Conversion		Execution Da	ite, if					Expiration Date			Amount of		Derivative			hip of Indirect
(Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/	Year) any (Month/Day/	Year)	Code (Instr. 8)		orities aired or osed O) r. 3,	Se		,		Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Security Direct (or Indirect	ve Ownership (Instr. 4)		
					Code V	(A)		Date Exer	cisable	Expirat Date	ion T	Γitle	Amount or Number of Shares				

Reporting Owners

Post Company (Addition	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
SEENDRIPU KISHORE C/O MAXLINEAR, INC. 5966 LA PLACE COURT, SUITE 100 CARLSBAD, CA 92008	X	X	President and CEO					

Signatures

/s/ Adam Spice, as Attorney-in-Fact	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.