FORM 4

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

OMB APPROVAL							
DMB Number:	3235-0287						
Estimated average burden							
ours per respon	se 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 * Kwong Connie H.					2. Issuer Name and Ticker or Trading Symbol MAXLINEAR INC [MXL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Corporate Controller & PAO					
C/O MAXLINEAR, INC., 5966 LA PLACE COURT, SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 11/15/2016												
(Street) CARLSBAD, CA 92008				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)		Т	able I - Non	-De	rivative S	ecurit	ies Acq	uired, Disp	osed of, or	Beneficially	Owned		
1.Title of S (Instr. 3)				1 2A. Deemed Execution Date, if		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Following	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership			
							Code	V	Amount	(A) or (D)	Price	e			or Indirect (I) (Instr. 4)	(Instr. 4)	
Class A 0 value \$0.	Common S 0001)	tock (par	11/15/2	2016			S		2,009	D	\$ 21.51	36 0			D		
							ities Acquir	the ed, I	form dis	splays	s a cur Benefic	are not req rently valid ially Owned	d OMB co			02)	
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transacti Date (Month/Day	y/Year) I	A. Deemed Execution D	d 4 Date, if 7	4. Transaction	5. Numbe	r 6. an	. Date Exercisable nd Expiration Date Month/Day/Year)		e 7. T e Ame Und Secu	Title and mount of nderlying ecurities nstr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	f Benefici ive Ownersh y: (Instr. 4) (D)	
						Code V	(A) (D)			Expira Date	ation T	Amount or Number of Shares					
Repor	rting O	wners															
Reporting Owner Name / Address				Relationships]							
Kwong C C/O MA		, INC.		Director	10%		fficer Corporate (Cont	troller &	PAO	Othe	r					

Signatures

CARLSBAD, CA 92008

/s/ Adam Spice, as Attorney-in-Fact	11/16/2016
**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).

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.