FORM 4

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

OMB APPROVAL					
OMB Number: 3235-0287					
stimated average burden					
ours 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 Typ	pe Responses)													
1. Name and Address of Reporting Person * Spice Adam C.			Issuer Name and Ticker or Trading Symbol MAXLINEAR INC [MXL] Date of Earliest Transaction (Month/Day/Year) 02/13/2017					5. F	Relationsh		ting Person(s k all applicab				
(Last) (First) (Middle) C/O MAXLINEAR, INC., 5966 LA PLACE COURT, SUITE 100								X	X Officer (give title below) Other (specify below) VP, Chief Financial Officer 6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by One Reporting Person Form filed by More than One Reporting Person)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)										_X_		
CARLSB.	AD, CA 92	(State)	(Zip)												
													neficially Ow		
1.Title of So (Instr. 3)	ecurity		Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Day	Date, i	(Instr	2	(A) (curities According Disposed (A) or (D) (A) or (D)	of (D) Ow Tra		wing Reports)]	Ownership o Form: B	Seneficial Ownership
			`	e.g., puts, ca	alls, w	varrant	quir	form disp ed, Disposed tions, conve	lays a curi l of, or Ben ertible secu	rently vali eficially O rities)	d OMB o	ontrol nur			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year		ear) (Instr. 8) Solution (5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/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)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)
					(A E (I (I	A) or Disposed D) Instr. 3,	d d of			Securities	_	-	Beneficially Owned Following Reported Transaction	Form of Derivative Security: Direct (D) or Indirect (S) (I)	Ownershi (Instr. 4)
				Code	(A E (I (I	A) or Disposed D) Instr. 3, nd 5)	d d of	Date Exercisable	Expiration Date	Securities (Instr. 3 ar	_	(Instr. 5)	Beneficially Owned Following Reported Transaction	Form of Derivative Security: Direct (D) or Indirect (S) (I)	Beneficial Ownershi (Instr. 4)

Reporting Owners

Reporting Owner Name / Address	Relationships					
reporting o where theme, traditions	Director	10% Owner	Officer	Other		
Spice Adam C. C/O MAXLINEAR, INC. 5966 LA PLACE COURT, SUITE 100 CARLSBAD, CA 92008			VP, Chief Financial Officer			

Signatures

/s/ Adam Spice	02/15/2017
**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) Each restricted stock unit ("RSU") represents a contingent right to receive one share of MaxLinear, Inc. Class A Common Stock.
- Subject to the Reporting Person's continuing to be a Service Provider (as defined in the 2010 Equity Incentive Plan) through each applicable vesting date, the restricted stock units (2) ("RSUs") subject to the award will vest as follows: one-sixteenth (1/16th) of the RSUs will vest on May 20, 2017, and one-sixteenth (1/16th) of the RSUs subject will vest on each August 20, November 20, February 20 and May 20 thereafter, such that the award will be fully vested on February 20, 2021.

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.