M/A-COM Technology Solutions Holdings, Inc. Form 4 November 12, 2015

FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								-	OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										3235-0287		
Check this box								Expires:	January 31, 2005			
subject to Section 16 Form 4 or		F CHANGES IN BENEFICIAL OW SECURITIES						Estimated a burden hou response	average Irs per			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940												
(Print or Type R	esponses)											
Kennedy John Francis Symbo			Symbol	2. Issuer Name <b>and</b> Ticker or Trading ymbol A/A-COM Technology Solutions				5. Relationship of Reporting Person(s) to Issuer				
Holdings, I				s, Inc. [M	TSI]			(Check all applicable)				
(Last)       (First)       (Middle)       3. Date of (Month/Data)         100 CHELMSFORD STREET       11/09/20				-				X Director 10% Owner X Officer (give title Other (specify below) SVP & GM, A&D				
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
LOWELL, MA 01851					Form filed by More than One Reporting Person					eporting		
(City)	(State) (	Zip)	Table	I - Non-D	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	med on Date, if Day/Year)	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, Amount	(A) o of (D	)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	11/09/2015			A	3,798 (1)	A	\$ 0	27,649 <u>(2)</u>	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Kennedy John Francis 100 CHELMSFORD STREET LOWELL, MA 01851	Х		SVP & GM, A&D				
Signatures							
/s/ Clay Simpson, Attorney-in-Fact	11/12	/2015					
**Signature of Reporting Person	Da	te					

## **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 performance based restricted stock units (the "Performance RSUs") granted on April 22, 2015 to the Reporting Person under the Issuer's 2012 Omnibus Incentive Plan which vested on November 9, 2015. The vested Performance RSUs will settle in shares of

- (1) common stock on May 15, 2016, provided that the Reporting Person remains in continuous service with the Issuer through the settlement date.
- Reflects an adjustment from previously reported ownership to exclude previously reported Performance RSUs granted, but for which the (2) vesting criteria has not been met.

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.