## Edgar Filing: MAXIM INTEGRATED PRODUCTS INC - Form 4

MAXIM INT Form 4 May 19, 2014	TEGRATED PRC	DUCTS	INC								
									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this box if no longer									Expires:	January 31,	
subject to		ENT OF	CHAN	GES IN BENEFICIAL OWNERSHIP OF					Estimated average		
Section 16.				SECUR	ITIES				burden hours per		
Form 4 or Form 5		want to C	action 1	f(a) of the	- Coordi	ian D	wahana	a A at of $1024$	response	0.5	
obligation	• •						•	e Act of 1934, 1935 or Section			
may cont <i>See</i> Instru 1(b).	inue.			vestment	•	· ·			I		
(Print or Type F	Responses)										
MURPHY MATTHEW J Symbol MAXIM			r Name <b>and</b> Ticker or Trading M INTEGRATED JCTS INC [MXIM]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (N	liddle)	3. Date of	Earliest Tr	ansaction			Director		Owner	
(Month/D 160 RIO ROBLES 05/15/20			nth/Day/Year)				_X_ Officer (give title Other (specify below)				
			05/15/20	014				SENIOR VP			
(Street) 4. If Am			4. If Ame	endment, Date Original			6. Individual or Joint/Group Filing(Check				
				onth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
	CN )5154							Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactic Code (Instr. 8) Code V	(Instr. 3,	ispose	d of (D)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	05/15/2014			F	1,622	D	\$ 32.11	34,773	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact: Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	4, and 5)	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				
MURPHY MATTHEW J 160 RIO ROBLES SAN JOSE, CA 95134			SENIOR VP					
Signatures								
BY MARK CASPER FOR MA	ATTHEW							
MURPHY			05/19/2014					
<u>**</u> Signature of Reporting Pe	erson		Date					
<b>Explanation of Re</b>	spon	ses:						

\* 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.