FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										

0.5

hours per response:

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Instr. 3)	Price of Derivative Security		(Month	/Day/Year)	8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					Underlying Derivative Security (Ins 3 and 4)		nt	str. 5)	Beneficially Owned Following Reported Transaction (Instr. 4)	or (I)	irect (D) r Indirect ) (Instr. 4)	Ownership (Instr. 4)	
1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any		4. Transactio Code (Insti		5. Number ion of str. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities		8. I De Se	Price of rivative curity	9. Number derivative Securities	O	0. wnership orm:	Beneficial	
		Tal	ble II -								osed of,				Owne	d				
Common Stock, \$0.001 par value 06/17/2					2024		S		312	D	\$1	\$1,800		,002(1)		D				
								Code	v	Amount	(A) or (D) Price		се	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution Da		d Date,	Code (Instr.		4. Securities Acquired (ADisposed Of (D) (Instr. 3)		ired (A)	, 4 and Secur Benef Owne		unt of ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	cially	/ Own	ed				
(City)	City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
(Street) PALO A	LTO CA	CA 94304			Person															
3421 HILLVIEW AVENUE												Line)	ine)							
C/O BROADCOM INC.					If Amendment, Date of Original Filed (Month/Day/Year)								)	6. Individual or Joint/Group Filing (Check Applicable						
(Last)	(Fi	rst) (N	3. Date of Earliest Transaction (Month/Day/Year) 06/17/2024									Office belov	er (give title v)		Other (s	specify				
1. Name and Address of Reporting Person* PAGE JUSTINE					2. Issuer Name and Ticker or Trading Symbol Broadcom Inc. [ AVGO ]										ationship k all app Direc	licable)	ng Person(s) to Is			

## **Explanation of Responses:**

Includes 189 restricted stock units.

## Remarks:

/s/ Noelle Matteson, Attorneyin-Fact for Justine F. Page 06/20/2024

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.

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 Number.