FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	)VAL				
l	OMB Number:	3235-0287				
	Estimated average burde	en				
l	hours per response:	0.5				

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

1. Name and Address of Reporting Person*  Kawwas Charlie B							2. Issuer Name and Ticker or Trading Symbol Broadcom Inc. [ AVGO ]									of Reporting cable) or (give title	ng Person(s) to Iss 10% Ov Other (s below) ef Sales Officer		Owner
(Last) (First) (Middle) C/O BROADCOM INC. 1320 RIDDER PARK DRIVE							3. Date of Earliest Transaction (Month/Day/Year) 04/02/2019												peony
(Street) SAN JOSE CA 95131 (City) (State) (Zip)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - N	Non-Deri	vativ	e Sec	urit	ies A	quire	d, D	isposed o	of, or Bo	eneficial	ly O	wned				
Di					tion y/Year)	Year)   Exec		Deemed ecution Date, ny onth/Day/Year)		ction Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			nd 5) Se Be Ov		Amount of ecurities eneficially wned Following		vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price	- 11	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock, \$0.001 par value 04/02/201							.9				10,000	Α	\$71.86	86 115		5,809(1)		D	
Common Stock, \$0.001 par value 04/02/201						19			S		10,000	D	\$304.507	)4.507 <sup>(2)</sup> 10		05,809(1)		D	
		-	Table I								sposed of, , converti			Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)			vative urities uired or oosed O) (Instr.	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Deri Sec	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	Ownership	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to	\$71.86	04/02/2019			M			10,000	(3	3)	06/09/2021	Commor Stock, \$0.001	10,000		\$0	20,000	)	D	

## **Explanation of Responses:**

- 1. Includes 62,625 Restricted Stock Units.
- 2. Transaction executed in multiple trades at prices ranging from \$304.31 to \$305.12 per share, inclusive. The price reported in column 4 above reflects the weighted average sale price per share. The Reporting Person hereby undertakes to provide the SEC staff, the Issuer or a security holder of the Issuer, upon request, full information regarding the number of shares sold at each respective price within the range set forth in this footnote.
- 3. Share price performance option (the "2014 Option") granted on June 10, 2014 pursuant to the Avago Technologies Limited 2009 Equity Incentive Award Plan. The 2014 Option vests over four years, with 25% vesting on each anniversary of the date of grant, such that the 2014 Option fully vested on June 10, 2018. The exercisability requirements for the 2014 Option have been met.

## Remarks:

/s/ Noelle Matteson, Attorney-In-Fact for Charlie B Kawwas

04/04/2019

\*\* 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.