FORM 4

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

	ashington,	D.C.	20549	
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STATEMENT	OF	CHANGES	IN	<b>BENEFICIAL</b>	OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-02										
Estimated average burden										
hours 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).

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*  You Harry L.				Bro	2. Issuer Name and Ticker or Trading Symbol Broadcom Inc. [ AVGO ]								ck all appl	icable)	ng Per	rson(s) to Is			
(Last)	(Fir	rst) (M	/liddle)			3. Date of Earliest Transaction (Month/Day/Year) 04/03/2023								Office below	r (give title		Other (s below)	specify	
C/O BRO	DADCOM :	INC.			4. If A	Amend	ment,	Date o	f Origina	I Filed	I (Month/Da	y/Year	)	6. Individual or Joint/Group Filing (Check Applicable					
1320 RII	ODER PAR	K DRIVE				, sale of original lies (lies lies of original)							1 1	Line) X Form filed by One Reporting Person					
(Street) SAN JOS	SE CA	A 9	5131											filed by More than One Reporting n					
					Rul	Rule 10b5-1(c) Transaction Indication													
(City)	(St	ate) (Z	Zip)			Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See													
	tive S	ve Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				y/Year) Execution		ution Date,				es Acquired (A Of (D) (Instr. 3,			Benefic Owned	ties Fo cially (D I Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) (D)	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock, \$0.001 par value 04			04/03/	2023			Α		397(1)	A	1	\$ <mark>0</mark>	2,5	510(2)		D			
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)	3A. Deer Execution if any (Month/I		Transaction Code (Instr. 8)  See Acc (A) Diss of (Instr. and		of	ired r osed ) : 3, 4			te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		S (I	. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
							(A)	(D)			Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

1. Grant of Restricted Stock Units ("RSUs"). Upon vesting thereof, the Reporting Person is entitled to receive one (1) share of the Issuer's common stock for each one (1) RSU. The Vesting Commencement Date is April 3, 2023. The RSUs vest in full on the earlier of (i) the first anniversary of the Vesting Commencement Date or (ii) the date on which the annual meeting of the Issuer's stockholders immediately following the Vesting Commencement Date is held, subject to the Reporting Person's continuing service on the vesting date.

2. Includes 397 RSUs

## Remarks:

/s/ Noelle Matteson, Attorney-04/05/2023 in-Fact for Harry L. You

\*\* Signature of Reporting Person Date

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

- \* 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.