FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number 3235-0287 Estimated average burden 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).

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

| 1. Name and Address of Reporting Person [*] Sciammas Maurice | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>MONOLITHIC POWER SYSTEMS INC</u> [MPWR] | | | | | | | | Check | all app Direc | | | Issuer Owner r (specify |
|--|---|--|--|----------------|--|--------|--|---|---------------|--|---|-------------------|------------------------|--|-----------|--|---|
| (Last) (First) (Middle) 79 GREAT OAKS BLVD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/07/2012 | | | | | | | | Х | belov | w) | below and Market | v) |
| (Street) SAN JOSE CA 95119 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 11/09/2012 | | | | | | | | 3. Indiv .ine) X | idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) Date (Month/Day/Ye | | | | Year) if | ar) 2A. Deemed Execution Date, if any (Month/Day/Year) | | · / | | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | 4 and 5) Secເ | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | Code V | | Amount | (A) or (D) | Price | | Repor Trans | | (1154.14) | (1150.14) | | |
| Common Stock 11/07/2012 | | | | 012 | | | S ⁽¹⁾ | | 398 | D | \$19.0 | 95 ⁽²⁾ | 1 | 15,108 | 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) | vative Conversion Date Execution urity or Exercise (Month/Day/Year) if any | | 3A. Deemed Execution Date, if any (Month/Day/Year | Code () 8) | ransaction of ode (Instr. Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5) | | vative rities uired r osed) r. 3, 4 | Expiration Date (Month/Day/Year) 4 Date Expiration | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares | | Secu (Inst | rice 9. Number of derivative Securities urity Beneficially Owned Following Reported Transaction(: (Instr. 4) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership |

Explanation of Responses:

1. In accordance with the reporting person's 10b5-1 trading plan.

2. The price is the weighted average sale price for the transactions reported on this line. The prices for the transactions reported on this line range from \$19.09 to \$19.10. The reporting person undertakes to provide, upon request by the staff of the Securities and Exchange Commission, the issuer, or a security holder of the issuer, full information regarding the number of shares sold at each separate price

Code V (A) (D)

Remarks:

This form is amended to correct the Form 4 filed on November 9, 2012. Due to the technical error by E-Trade the number of securities sold on November 7, 2012 was incorrectly reported. This form is amended to correct the number of shares sold

By: Saria For: Maurice <u>Sciammas</u>

12/04/2012

** 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.