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

Name and Address of Reporting Person*     Hsing Michael				2. Issuer Name and Ticker or Trading Symbol MONOLITHIC POWER SYSTEMS INC [ MPWR ]											5. Relationship of Repo (Check all applicable) X Director				10%	ó Owner
(Last) (First) (Middle) 79 GREAT OAKS BLVD					3. Date of Earliest Transaction (Month/Day/Year) 08/11/2014										X	belov	er (give tit w)	CEO	belo	er (specify ow)
(Street) SAN JOSE CA 95119					4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting     Person					
(City)	(Sta		ip)	ativo S	ative Securities Acquired, Disposed of, or Beneficially Owned															
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date,			3. Transaction Code (Instr.			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an					5. Amoun Securities Beneficial Owned		nt of es ally	Form (D) or Indire	ect (I)	7. Nature of Indirect Beneficial Ownership
							Code		v	Am	ount	(A) or (D)	Pric	ce		Followin Reported Transact (Instr. 3	d tion(s)	(Instr	. 4)	(Instr. 4)
Common	Stock		08/11/2014				<b>S</b> <sup>(1)</sup>	)		78	8,529	D	\$4	2.5513	(2)	307	,860		D	
Common Stock														465,566		I		By Jointly w/Spouse		
Common Stock															133,040				By S. Hsing 04 Trust	
Common Stock															29,000		I		Hsing Fam Foundation	
Common Stock															133,040				I	by M Hsing 04 Trust
	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. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		5. Nu of Deriv Secur Acqu (A) or Dispo of (D) (Instr and 5	ative ities ired sed	Exp	Date E piratio onth/I	on D		Am Sec Un De Sec	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		of D	Price f erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownersh Form: Direct (D or Indire (I) (Instr. 4)	Beneficial Ownership
				Code	v	(A)	(D)	Dat Exe	te ercisa	ıble	Expiration Date	or Nu n of		or Number						

## Explanation of Responses:

- 1. Transaction was executed during an authorized trading window in compliance with the Company's Insider Trading Compliance Program.
- 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 \$42.41875 to \$42.75. 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.

By: Saria Tseng For: Michael Hsing 08/12/2014

\*\* 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.