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* Ueunten Paul						2. Issuer Name and Ticker or Trading Symbol MONOLITHIC POWER SYSTEMS INC [MPWR]										all appl Direct	or	ng Pe	rson(s) to Is 10% O	wner
(Last) (First) (Middle) 6409 GUADALUPE MINES ROAD						3. Date of Earliest Transaction (Month/Day/Year) 10/14/2009										Officer (give title below) Sr. V.P. Design			below)	
(Street) SAN JOS (City)			2512 Zip)	0	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									3. Indiv Line) X	vidual or Joint/Group Fil Form filed by One Re Form filed by More th Person			orting Perso	on
. ,,				- Non-Deriv	/ativ	re S	ecı	uriti	ies A	cquir	ed, D	isposed o	of, or B	enefic	ially	Owne	d			
Dat			2. Transaction Date (Month/Day/Ye	ear)	r) if any		emed ion Date, /Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4			and 5) Secur Benef Owne		icially d	6. Ownership Form: Direct (D) or Indirect (I)	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Common Stock			10/14/2009						M ⁽¹⁾		30,000	A	\$9.3	32	88	8,095		D		
Common Stock		10/14/200	9	\perp				S ⁽¹⁾	$oxed{oxed}$	30,000	D	\$22.07	721(2)		8,095		D			
Common Stock															153,556				Ueunten Trust I	
Common Stock															123,900				Ueunten Trust II	
Common Stock															30,55		0,550	I		Ueunten Trust III
Common Stock															30,550				Ueunten Trust IV	
		Ta	able	II - Deriva								posed of, converti				wned		,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed		4. Trans			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration I (Month/Day		cisable and Date	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. F of Der Sec (Ins	Price rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
					Code	e	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amour or Number of Shares	er					
Non- Qualified Stock Option (right to buy)	\$9.32	10/14/2009			M ⁽¹	1)			30,000	06/1	5/2006	06/15/2015	Commor Stock	30,00	00	\$0	30,762		D	

Explanation of Responses:

By: Adriana Chiocchi For: Paul Ueunten

10/14/2009

** Signature of Reporting Person

Date

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

^{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 \$20.87 to \$21.28. 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.

 $^{^{\}star}$ 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.