FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

#### Washington, D.C. 20549

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

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(0). 30	ee instruction i	0.																	
1. Name and Address of Reporting Person*  Bryant Diane M						2. Issuer Name <b>and</b> Ticker or Trading Symbol  Broadcom Inc. [ AVGO ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Diyant Diane W									-	-				1	Direc	tor		10%	Owner
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 12/23/2024									Office	er (give title w)		Othe belov	r (specify v)
C/O BROADCOM INC.						12/23/2027													
3421 HILLVIEW AVENUE						If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(04														ine)					
(Street) PALO ALTO CA 94304			4304											Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(St	ate) (2	Zip)												reisc	л			
		Table	I - N	on-Deriva	tive	Secui	rities	Ac	quire	d, Di	sposed of	f, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y				Year)	Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acqui Disposed Of (D) (In					5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		ion(s)			(Instr. 4)
Common Stock, \$0.001 par value 12/23/202					24	:4		S <sup>(1)</sup>		15,000	D	\$226.0	68	6,460(2)			D		
Common Stock, \$0.001 par value														320(3)			I	See Footnote	
		Tal	ole II	- Derivati (e.g., pu							oosed of, convertib				Owned	t			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if any	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Exer ration D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Deri Sec	Price of 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.	Beneficia Ownershi t (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares						

#### **Explanation of Responses:**

- 1. Transaction made pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.
- 2. Adjusted to reflect a ten-for-one forward split of the Issuer's common stock effective after market close on July 12, 2024 and includes 1,890 restricted stock units.
- 3. Adjusted to reflect a ten-for-one forward split of the Issuer's common stock effective after market close on July 12, 2024.
- 4. Shares held by The Diane M. Bryant Trust u/a/d 11/08/17, for which the Reporting Person serves as Trustee.

## Remarks:

/s/ Noelle Matteson, Attorney-12/26/2024 in-Fact for Diane M. Bryant

\*\* 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.