FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPF	ROVAL
OMB Number:	3235-0287
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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

Name and Address of Reporting Person* Machinely, Alexander				2. Issuer Name and Ticker or Trading Symbol NOVATEL WIRELESS INC [MIFI]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Mashinsky Alex</u>				1)	Directo	Director		10% O	vner	
(Last)	t) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)								–		Officer (give title below)		Other (: below)	specify	
9645 SCRANTON ROAD			04	04/29/2015										C	Chief Executive Officer					
SUITE 2	.05																			
					4.1	f Ame	ndme	nt, Date	of Or	riginal F	iled	(Month/Da	ay/Year)			dividual or 3	loint/Group	Filing	(Check Ap	plicable
(Street)															Line)		ilod by One	Dono	rting Porco	n
SAN DII	EGO CA 92121														2	X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(S	tate)	(Zip)		-										Person				iting	
(City)	(3		(Σιρ)																	
		Tab	le I - Nor	າ-Deriv	vativ	e Se	curit	ies Ac	qui	ired, [Disp	osed o	of, or E	Ben	eficiall	y Owned	l			
Date			2. Trans Date (Month		Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transac Code (In 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				Securiti Benefici			: Direct r Indirect	7. Nature of Indirect Beneficial Ownership	
							(month // Day/ real)		` -	- T	v	Amount	(A (D) or)	Price	Reporte Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 04/2				04/2	9/201	/2015			M ⁽¹⁾		18,405		A	\$0.0	777,682			D		
Common Stock 04/2			9/201	/2015			F ⁽²⁾		6,895		D	\$6.27	770,787			D				
		-	Гаble II -	Deriva	ative	Sec	uritie	es Aca	uire	ed, Di	spc	sed of	or Be	nef	icially	Owned		,	,	
												onverti								
1. Title of Derivative Security (Instr. 3)		se (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	Code (Instr				6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Own Form Direct or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	N C	Amount or Number of Shares					
Restricted Stock	\$0.0 ⁽³⁾	04/29/2015			M			18,405		(4)	T	(4)	Commo Stock		18,405	\$0.0	36,81	0	D	

Explanation of Responses:

- 1. Reflects vesting of Restricted Stock Units previously awarded to the Reporting Person.
- 2. Automatic disposition of shares back to Issuer (and subsequent cancellation thereof) solely to satisfy immediate payroll tax withholding obligation triggered by the vesting of restricted stock. The Reporting Person received no proceeds from this transaction.
- 3. Each Restricted Stock Unit represents the contingent right to receive one share of common stock upon vesting of the unit.
- 4. These Restricted Stock Units vest one-third annually beginning on the first anniversary of the award date.

/s/ Michael Newman, Attorney-05/01/2015 in-Fact

** Signature of Reporting Person

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.