FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasiiiigton,	D.C. 20549	

OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

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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

1. Name and Address of Reporting Person*  GRIFFIN LIAM				2. Issuer Name and Ticker or Trading Symbol SKYWORKS SOLUTIONS, INC. [ SWKS ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
GRIFFIN LIAM														·   :	X Director		10% Owner		/ner	
(Last) 5221 CA	(F LIFORNI <i>A</i>	irst) AVENUE	(Middle)			of Earli 2017	iest Trans	saction (Month/Day/Year)						Officer (give title below)  Other (spec below)  President and CEO				pecify		
(Street)	C.		92617		4. 1	If Amendment, Date of Original Filed (Month/Day/Year)							Line	G. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)	a Doris	,ativ	0.50	ourit	ioc Ao	quiroc	Die	enocod o	of or	Pon	oficiall	v Ownod					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.				(A) or	5. Amou Securitie Beneficia Owned F	s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount		A) or D)	Price	Reported Transact (Instr. 3 a	ion(s)			(instr. 4)			
Common Stock			12/14	4/2017				M <sup>(1)</sup>		13,21	13,212 A		\$77.6	6 62,359			D			
Common Stock			12/14	12/14/2017				S <sup>(1)</sup>		13,21	2	D	\$95.10	2) 49	49,147		D			
Common Stock			12/14	4/2017				S <sup>(1)</sup>		1,847	7	D	\$95	47,	7,300		D			
Common Stock													11,7	757 <sup>(3)</sup>		I	By 401(k) plan			
			Table II -								osed of converti				Owned					
1. Title of Derivative Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date Execution Date (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)		Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	ıble	Expiration Date	Title		Amount or Number of Shares						
Employee Stock Option (right to	\$77.66	12/14/2017			M <sup>(1)</sup>			13,212	(4)		11/09/2023	Comr		13,212	\$0.00	39,633	3	D		

## **Explanation of Responses:**

- 1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on 8/15/2017.
- 2. The price reflects the average selling price of the shares sold. Actual sale prices ranged from \$95.00 per share to \$95.89 per share.
- 3. This total represents the number of shares of common stock held by the Reporting Person in the Skyworks Solutions, Inc. 401(k) plan based on the latest plan statement dated 11/30/2017.
- 4. This stock option vests in four (4) equal installments, beginning on 11/9/2017 and ending on 11/9/2020.

## Remarks:

Daniel L. Ricks, as Attorneyin-Fact for Liam K. Griffin

12/15/2017

\*\* 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.