FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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).

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* BEGUWALA MOIZ						2. Issuer Name and Ticker or Trading Symbol SKYWORKS SOLUTIONS INC [SWKS]									Relationshineck all ap	,	.,	o Issuer 6 Owner	
(Last) (First) (Middle) 20 SYLVAN ROAD						3. Date of Earliest Transaction (Month/Day/Year) 11/20/2008									Offic belo	er (give title w)		er (specify ow)	
(Street) WOBURN MA 01801 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									e) X Forr Forr	ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	e I - Non	-Deriv	ative	Sec	uritie	s Ac	quired,	Disp	osed o	f, or	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			Code (Instr. 5)					d Secur Benef Owne	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		
									Code	v	Amount (A) or D)	Price		action(s) 3 and 4)		(Instr. 4)	
Common Stock 11/20/2							2008		P		2,000		A	\$4.	3 2	5,855	D		
		Та	ble II - D (e								sed of, onvertib				Owned				
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/Ye	Date,	Code (Ins				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		tr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Num of Shar	.					

Explanation of Responses:

Remarks:

Robert J. Terry, Attorney-In-

Fact

** Signature of Reporting Person

Date

11/24/2008

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.