SEC Form 4	
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).

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 10b5-1(c). See Instruction 10.

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

OMB APPROVAL					
MB Number:	3235-0287				

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

1. Name and Address of Reporting Person [*] BORI CARLOS S		on*	2. Issuer Name and Ticker or Trading Symbol <u>SKYWORKS SOLUTIONS, INC.</u> [SWKS]		ionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner	
(Last) 5260 CALIFOR	(First) RNIA AVENUE	(Middle)	J 3. Date of Earliest Transaction (Month/Day/Year) 10/14/2024		Officer (give title below) SVP, Sales & Mar	Other (specify below) keting
(Street) IRVINE (City)	CA (State)	92617 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing (Form filed by One Repor Form filed by More than (Person	ting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.					5. Amount of Securities Beneficially Owned 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 Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	10/14/2024		S ⁽¹⁾		4,301	D	\$ 97.16 ⁽²⁾	32,902	D	
Common Stock	10/14/2024		S ⁽¹⁾		5,876	D	\$ 97.98 ⁽³⁾	27,026	D	
Common Stock								1,738(4)	Ι	By 401(k) plan

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 10. 11. Nature Derivative Conversion Date Execution Date, Transaction Expiration Date Amount of Derivative derivative Ownership of Indirect Security (Instr. 3) if any (Month/Day/Year) Code (Instr. 8) Security (Instr. 5) or Exercise (Month/Dav/Year) Derivative (Month/Day/Year) Securities Securities Form: Beneficial Securities Acquired Underlying Derivative Price of Beneficially Direct (D) Ownership (Instr. 4) Derivative Owned or Indirect (I) (Instr. 4) Security (A) or Security (Instr. 3 and 4) Following Reported Disposed of (D) Transaction(s) (Instr. 3, 4 (Instr. 4) and 5) Amount Number Date Expiration v Title Code (A) (D) Exercisable Date Shares

Explanation of Responses:

1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on 6/10/2024.

2. The price reflects the average selling price of the shares sold. Actual sale prices ranged from \$96.95 per share to \$97.35 per share.

3. The price reflects the average selling price of the shares sold. Actual sale prices ranged from \$97.38 per share to \$98.35 per share.

4. 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 9/30/2024.

Remarks:

Ashran Jen, as A	ttorney-In-
Fact for Carlos S	S. Bori

10/16/2024

** 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.